P10000061409

(Re	equestor's Name))
(Ac	ldress)	
(Ac	dress)	•
(Ci	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	cument Number)
`		,
Certified Copies	Certificate	s of Status
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2010 SEP 20 PH 12: 5

Amend

SEP 2 1 2010

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORF	PORATION: BR166	s Family Insurance	CE SERVICES, INC.
DOCUMENT NU	MBER:	2061409	Mit with
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning this	s matter to the following:	
		D. BRIGOS ame of Contact Person	
	-	Firm/ Company	E SERVICES, INC.
	_	ningdale Ave Suc	te A
		n Fz 33511	
		ty/State and Zip Code 1995 C. BRILDS TWSUN	ANCE COM
	E-mail address: (to be used	for future annual report notification)	•
	ation concerning this matter,	please call:	
Bret Br	2 1995	at (813) 684-	0400
Name	of Contact Person	Area Code & Daytime Tele	phone Number
Enclosed is a checl	k for the following amount m	ade payable to the Florida Depart	ment of State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation of

BR1665+Ami	Ly INSURANCE	E SERVICES, I	NC.
(Name of Corporation as curr	_	la Dept. of State)	
P100000 6140			
(Document Nur	nber of Corporation (if kno	own)	
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this F	<i>lorida Profit Corporation</i> ad	opts the following
A. If amending name, enter the new name o	f the corporation:		
			The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp," "Inc	c," or "Co". A professional	ed" or the corporation
B. Enter new principal office address, if app			_
(Principal office address MUST BE A STREE	T ADDRESS)		-2
		P	
			法 写 二
C. Enter new mailing address, if applicable		79	海巴加
(Mailing address <u>MAY BE A POST OFFI</u>	<u></u>		部。宝世
			170 G
			一部。
D. If amending the registered agent and/or r		n Florida, enter the name of	the THE
new registered agent and/or the new regis	stered office address:		
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:	(Florida street a	address)	
		. Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing	ng Registered Agent:		
I hereby accept the appointment as registered a		nd accept the obligations of th	e position.
$\frac{-}{s}$	ignature of New Registered	d Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:
(Attach additional sheets, if necessary)

<u>Titl</u>		<u>Address</u>	Type of Action
> <u>57</u>	D STEPHENA BRIGGS	611 E Blooming Aple Suite A BNANDOM 72 33511	☐ Add
	D	BNANDOM 72 33511	E Remove
PST	Brett Brises	BIE Bloomingdale Aves Title A BIANDON 72 33511	Add Add
		Sult A	Remove
-	Sport Aul Pain		
<u>ン</u>	STEPHEN A.W. Briggs	61/2. Blocoming delle Able	☐ Add ■ Remove
		B1ANDON76 33511	
	amending or adding additional Articles, ent		
(;	ttach additional sheets, if necessary). (Be spe	ecific)	

			,
F.	If an amendment provides for an exchange, reprovisions for implementing the amendment		
	(if not applicable, indicate N/A)	II not contained in the amendment i	
	$a \cdot M$		
	11/11	/	
	/WH		
	1 2 ()		

The date of each amendment	(s) adoption: 9//5//O
Effective date if applicable:	9/15/10 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
The amendment(s) was/wer must be separately provided	re approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)
action was not required.	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
action was not required.	. , ,
Dated	9/15/10
Signature	
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Brett D. BRIGGS
	(Typed or printed name of person signing)
	President
	(Title of person signing)