P10000004833

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T. LEWIS

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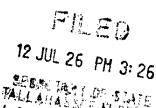
Division of Corporations
NAME OF CORPORATION: T&CT INSURANCE SERVICES, INC. DOCUMENT NUMBER: P10000064833
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Teshlee P. Senat. Name of Contact Person
Firm/ Company
20295 NW 279 AVE STE 304
Address Hiam: FL - 33169 City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jeshler P Senat = 305 3516354
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status (Additional Copy is enclosed)

TO: Amendment Section

Mailing Address
Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



	Articles of Incorporation	9 .0	PA CO PH	3: 26
TA CT TNSCIPPA	or HC SERVICES	- TAL	例如是的	TATE Thens
	ently filed with the Florida Dept. of	State)		
P1000006483	3			
(Document Nur	nber of Corporation (if known)			
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit (Corporation ado	pts the following	amendment(s) to
A. If amending name, enter the new name of the first of the name must be distinguishable and contain to "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	AL SERVICES, he word "corporation," "company, "Corp," "Inc," or "Co". A profess	" or "incorpore	ated" or the ab	The new breviation ontain the
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>				
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI				
D. If amending the registered agent and/or new registered agent and/or the new regis		enter the name	of the	
Name of New Registered Agent				
-	(Florida street address)			
New Registered Office Address:		, Florida	, ,	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changi I hereby accept the appointment as registered of	ng Registered Agent:	the obligations	of the monition	
r nevery uccept the appointment as registered to	ızem 1 ат јатшаг жип апа ассері	ine ovugations (oj ine position.	

Signature of New Registered 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John De	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	<u>ones</u>		
X Add	<u>sv</u>	Sally S	<u>mith</u>		
Type of Action (Check One)	<u>Title</u>		Name	Address	
1) Change					
Add					
Remove					
2) Change	•				
Add					
Remove				·	
3) Change					•
Add	•				7
Remove					
4) Change					
Add				***************************************	
Remove					
5) Change		_			
Add					
Remove					
6) Change		_			
Add					
Remove				•	

ach additional sheets, if neo	onal Articles, enter change(s) h cessary). (Be specific)		
· 			
11			
	NA		
	171		
	······		
<u>n amendment provides fo</u> ovisions for implementing	r an exchange, reclassification, the amendment if not containe	or cancellation of issued d in the amendment itsel	<u>shares.</u> f:
(if not applicable, indica	te N/A)		
	1//1		
	/ W/#		
	·····		

ne date of each amendment(s) ac	doption: 07/09/2013
Tective date <u>if applicable</u> :	07/09/2012
	(no more than 90 days after amendment file date)
loption of Amendment(s)	(CHECK ONE)
· · · · · · · · · · · · · · · · · · ·	(ONDON ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement reach 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)
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 07	7/09/2012
Signature	Bickel
(By a d	lirector, president or other officer - if directors or officers have not been
	d, by an incorporator - if in the hands of a receiver, trustee, or other court
appoint	ated fiduciary by that fiduciary)
	Jeshler J. Ilnat
	(Typed or printed name of person signing)
	- President
	(Title of person signing)