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(Rec	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
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12 JUL 23 PM 1: 18



JUL 2 3 2012

T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: Always	Reliable Ins	UPANCE NC.
DOCUMENT NUMBE	R: P100000	72101	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
	ANDREA	Pincones- Ma Name of Contact Person	avilar
	A 1	Firm/ Company	•
	4917 5.0	RANGE AVE	
	ORLANDO, F	Address 1. 3280 City/ State and Zip Code	e
		eliable@att.	
For further information of	oncerning this matter, pleas	se call:	·
ANDREA Name of	RINCONES Contact Person	at (at Co) <u>688 - 1474</u> de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment 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)
Ameno Divisio P.O. B	mg Address Iment Section on of Corporations ox 6327	Amend Divisio Clifton	Address Iment Section on of Corporations Building

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



ALWAYS RELIABLE INSURANCE, INC.	
(Name of Corporation as currently filed with the Florida Dept, of State)	- PM 1: 18
(Document Number of Corporation (if known)	-
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following the Articles of Incorporation:	g amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the a "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	- -
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	- -
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address;	-
Name of New Registered Agent (Florida street address)	
New Registered Office Address:, Florida	-
New Registered Agent's Signature, if changing Registered Agent; I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the 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 <math>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.

Example: X Change	<u>PT</u>	John Doe	
-			
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>VP</u>	David Rincones	3589 Conroy Rd Unit 1022
X Add Remove			Orlando, FL. 32839
2) × Change	P	ANDREA RINCONES	3589 CONROY RD UNIT 1022
Add Remove			ORLANDO, FL. 32839
3) Change	P	SANTOS LOPEZ	3555 ROBERT TRENT JONES DR
Add			ORLANDO, FL.32835
X Remove			46. 4001. And Andrews And Andrews 10. 10. 10. 10. 10. 10. 10. 10. 10.
4) Change			
Add Remove			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

attach additional sh	ing additional Articles, enter change(s) here: eets, if necessary). (Be specific)
	/
	
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<u> </u>	
	
If an amendment pr provisions for impl	ovides for an exchange, reclassification, or cancellation of issued shares, lementing the amendment if not contained in the amendment itself:
(if not applicable	le, indicate N/A)
 	
, .	
	

The date of each amendment(s) ad	option: 7 (13 (2012
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	or the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) was/were adoptaction was not required.	oted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopt action was not required.	oted by the incorporators without shareholder action and shareholder
Dated 06/25/2	2012
selected	rector, president or other officer – If directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other court
appointe	ed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
-	PREDIDENT SECRETARY (Title of person signing)