P11000011411

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15 SEP | 4 PM 1: 50

SEGRETARY OF STATE

SEP 18 2015

C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SECURE LIFE FI	NANCIAL, INC.				
DOCUMENT NUMB	P11000011411					
The enclosed Articles of	of Amendment and fee are su	abmitted for filing.				
Please return all corresp	pondence concerning this ma	atter to the following:				
	IAN ILLYCH MARTINEZ,	ESQ.				
-	·	Name of Contact Person	n			
	BELLO & MARTINEZ, PLI	LC.				
-	Firm/ Company					
:	800 DOUGLAS ROAD, SUITE 149					
-	Address					
•	CORAL GABLES FL 33134					
-		City/ State and Zip Code	e			
imartii	nez@bmrlawgroup.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
IAN ILLYCH MARTI	NEZ, ESQ.	. 305	442-7970			
Name of Contact Person		at (Area Code & Daytime Telephone Number				
Englosed is a check for	the following amount made					
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtinent 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)			
	ing Address	Street	Address			
	idment Section	Amendment Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



SECURE LIFE FINANCIAL, INC.

15 SEP 14 PH 1:50

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
11000011411	
(Document Number	of Corporation (if known)
tursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corporation:	
I/A	The new
ame must be distinguishable and contain the word "corporati Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ord "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
	N/A
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	
. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	N/A
 If amending the registered agent and/or registered office address new registered agent and/or the new registered office address 	
N/A	_
Name of New Registered Agent	
(Florida s	treet address)
·	,
New Registered Office Address:	, Florida
New Registered Office Address:	(City) , Florida, (Zip Code)
law Bagistanad Agantla Cianatura 26 June 1	
ew Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiar	<u>t:</u> with and accept the obligations of the position.
	, 0
Signature of New 1	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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Address</u>
1) Change	EV	ROBERTO MARTINEZ	15280 NW 79 CT
X Add			SUITE 103
Remove			MIAMI LAKES, FL 33016
2) Change	V	RAUL SAHAGUN	15280 NW 79 CT
X Add			SUITE 103
Remove			MIAMI LAKES, FL 33016
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

c. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
i/A	

The date of each amendment		FIL. SECRETARY OF CO	OF STATE DESTATE JEPORIM ÉMA	, if other than the
date this document was signed. Effective date if applicable:	09/01/2015	15 SEP 14	PM 1:50	
(no more than 90 days after amendment file date)				
Note: If the date inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed as the document's effective date on the Department of State's records.				
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. There sufficient for approval.	The number of votes ca	ast for the amendment(s)	
	e approved by the shareholders t d for each voling group entitled			
"The number of votes	cast for the amendment(s) was/v	vere sufficient for app	roval	
by				
	(voting group)			
The amendment(s) was/wer action was not required.	e adopted by the board of directo	ors without shareholde	r action and shareholder	
The amendment(s) was/were action was not required.	e adopted by the incorporators w	rithout shareholder act	ion and shareholder	
Dated	9/9/15			
Signature ×				
(By a director, president or other officer – if directors or officers have not been selected by an incorporator – if in the hands of a receiver, trustee, or other court				
80. ap	pointed fiduciary by that fiducia	the hands of a receive ry)	r, trustee, or other court	
	fernando espinosa,	•		
(Typed or printed name of person signing)				
	PRESIDENT			
(Title of person signing)				