P11000029756

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION:POPULAR INS	URANCE CORP	
DOCUMENT NUMBER:	P11000029756		
The enclosed Articles of A	mendment and fee are su	bmitted for filing.	
Please return all correspond	dence concerning this ma	tter to the following:	
Alej	andro Hernandez		
Popi	ular Insurance Corp	Name of Contact Person	
		Firm/ Company	
212	3 SW 27TH AVE	Title Company	
		Address	
Mia	mi FL 33145		
		City/ State and Zip Code	:
popularin	s@gmail.com		
	~ -	sed for future annual report	notification)
For further information cor	ncerning this matter, pleas	se call:	
Alejandro Hernandez		at (456-2841
Name of Co	ontact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	rtment of State:
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Division P.O. Box	of Corporations	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssec, FL 32301

Articles of Amendment to Articles of Incorporation of

POPULAR INSURANCE CORP

(Name of Corporation as curre	ntly filed with the Florida De	ent. of State)
P11000029		- r
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	nis Florida Profit Corporation	adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:		
SUNPLEX INSURANCE CORP		The new
ame must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviatio	r "Co". A professional corp	rporated" or the abbreviation oration name must contain the
3. Enter new principal office address, if applicable:	N/A	73
Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		
		
Enter new mailing address, if applicable:	*1/*	,,
(Mailing address MAY BE A POST OFFICE BOX)	N/A	9
		ر. <i>ب</i> ب
		
. If amending the registered agent and/or registered office a		a <u>me of the</u>
new registered agent and/or the new registered office addr	ess:	
Name of New Registered Agent N/A		
(Florida	street address)	
New Registered Office Address: N/A		. Florida
New Registerea Office Maness.	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered Age hereby accept the appointment as registered agent. I am familio		ions of the position.
Signature of Nev	w Registered Agent, if changin	g

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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change	<u> </u>		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Changa			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
		
······································		
<u>. </u>		
		_
	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
 ,		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 da	ys after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK QNE)	
☐ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	aber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were sur	flicient for approval
by(voting group)	
(voting group)	
■ The amendment(s) was/were adopted by the board of directors with action was not required.	out shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
07/17/2019 Dated	_
Signature	
(By a director, president or other officer – selected, by an incorporator – if in the har appointed fiduciary by that fiduciary)	
Alejandro Hernandez	
(Typed or printed name	of person signing)
PD	
(Title of pe	erson signing)