

P11 000041315

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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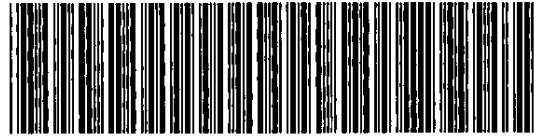
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

4/27/17

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PALM BEACH INSURANCE SERVICES, INC

DOCUMENT NUMBER: p11000041315

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSHUA HITE

Name of Contact Person

PALM BEACH INSURANCE SERVICES, INC

Firm/ Company

12361 HAGEN RANCH RD, STE 501

Address

BOYNTON BEACH, FL, 33437

City/ State and Zip Code

JOSHUA.HITE@BRIGHTWAY.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSHUA HITE

at (561)

424-2810

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

☐ \$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)

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
of

Palm Beach Insurance Services, Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the 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 JOSHUA HITE


12361 HAGEN RANCH RD, STE 501

(Florida street address)

New Registered Office Address: BOYNTON BEACH, Florida 33437
(City) (Zip Code)

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

(Attach additional sheets, if necessary)

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.

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
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X Remove V Mike Jones

<u>X</u> Add	SV	Sally Smith
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1) <u> </u> Change	VP	<u>STRUM, LAWRENCE M</u>	<u>11152 KAUAI CT</u>
<u> </u> Add			<u>BOYNTON BEACH, FL, 33437</u>
X Remove			

2) <u>X</u> Change	P	HITE, JOSHUA	11094 BAYBREEZE WAY
<u> </u> Add			BOCA RATON, FL, 33428
<u> </u> Remove			

3) ____ Change _____
____ Add _____
Remove _____

4) _____ Change _____
 _____ Add _____
 Remove _____

5) _____ Change _____
 _____ Add _____
 _____ Remove _____

6) _____ Change
_____ Add
Remove

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

EFFECTIVE 04/24/2017, JOSHUA HITE OWNS 100% OF THE SHARES IN PALM BEACH INSURANCE SERVICES.

INC

EFFECTIVE 04/24/2017, JOSHUA HITE'S TITLE CHANGED FROM "V" TO "P"

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

FOR THE CONSIDERATION AGREED UPON IN THE AGREEMENT CALLED "BUYOUT AGREEMENT FOR
PURCHASE AND SALE OF CORPORATE STOCK AND ASSETS OF PALM BEACH INSURANCE SERVICES, INC.",
LAWRENCE STRUM'S SHARES CHANGE FROM 51 TO 0 AND JOSHUA HITE'S SHARES CHANGE FROM
49 TO 100.

04/24/2017

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

04/24/2017

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing 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/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided 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 PALM BEACH INSURANCE SERVICES, INC

(voting group)"

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

04/20/2017

Dated _____

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 appointed fiduciary by that fiduciary)

JOSHUA HITE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)