## P11000063345

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## **COVER LETTER**

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TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: <u>EAGLEMAX</u> <u>TNSURANCE</u> + TAX SET VICES IN C DOCUMENT NUMBER: <u>P/1 0000 63345</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Douglas McKenzie  Name of Contact Person  EAGLEMAX INSURANCE + TAX JERVICES INC  Firm/ Company  3900 W Commercial Rlub, Suite 235  Address  Tamarac, FZ 33309  City/ State and Zip Code  dougnalenzie Deaglenaxins warke. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Douglas Mc Kenzie at (954) 812-9608  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    Same Status   Same Status   Same Status   Same Status
Mailing Address Street Address

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

## Articles of Amendment to Articles of Incorporation

of

EAGLEMAX INSURANCE & TAX.	JERVICES INC
(Name of Corporation as currently	filed with the Florida Dept. of State)
Name of Corporation as currently P11000063345	
(Document Number of	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
EAGLE-USA INSURANCE + TA	X SERVICES /NC The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation of the Aprofessional corporation name must contain the
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)	
	ss in Florida enter the name of the
D. If amending the registered agent and/or registered office addressinew registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	ss in Florida, enter the name of the
(Florida stree	t address)
New Registered Office Address:	, Florida,
A.	ity) (Zip Code)
N. D. Van Land Co., and Co. and Co. and Co.	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the position.
Signature of New Res	tistered Agent, if changing
•	and the second s

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	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
I)Change	<del></del>	
Add		· · · · · · · · · · · · · · · · · · ·
Remove		
2) Change		
Add		
Remove		
3 ) Change		
Add		
Remove		
4) Change	<del></del>	
Add		
Remove		<del></del>
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

	cles, enter change(s) here: (Be specific)		
			<u> </u>
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		<u> </u>	
		ation of issued chares	
If an amendment provides for an exc	hange, reclassification, or cancel	mendment itself:	
If an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellendment if not contained in the a	mendment itself:	
provisions for implementing the amo	hange, reclassification, or cancellendment if not contained in the a	mendment itself:	
provisions for implementing the amo	hange, reclassification, or cancellendment if not contained in the a	mendment itself:	
provisions for implementing the ame	hange, reclassification, or cancellendment if not contained in the a	mendment itself:	
provisions for implementing the ame	hange, reclassification, or cancellendment if not contained in the a	mendment itself:	
provisions for implementing the amo	hange, reclassification, or cancellendment if not contained in the a	mendment itself:	
If an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassification, or cancellendment if not contained in the a	mendment itself:	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(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 vidocument's effective date on the Department of State's records.	vill not be listed as the
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	
(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.	
Dated 10/27/2017 Signature 574 (2017)	
(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)	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Resident	
(Title of person signing)	

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