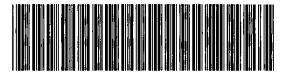
P11000074140

| (Re | questor's Name) | · · · · · · · · · · · · · · · · · · · |
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| (Ade | dress) | |
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| (City | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | siness Entity Nar | ne) |
| (Dod | cument Number) | <u> </u> |
| Certified Copies | Certificates | s of Status |
| Special Instructions to I | Filing Officer: | |
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COVER LETTER

TO: Amendment Section Division of Corporations

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| NAME OF CORPOR | RATION: Shoff Insurance II | , Inc. | |
|-------------------------|--|--|--|
| DOCUMENT NUM | P11000074140 | | ···· |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corre | spondence concerning this ma | tter to the following: | |
| | Roland Shoff | | |
| | | Name of Contact Person | n |
| | Shoff Insurance II, Inc. | | |
| | | Firm/ Company | |
| | 1202 Vestavia Circle | | |
| | | Address | |
| | Melbourne, FL 32940 | | |
| | | City/ State and Zip Cod | е |
| mich | elleshoff@gmail.com | | |
| - | E-mail address: (to be us | sed for future annual report | notification) |
| For further informatio | n concerning this matter, plear | se call: | |
| Roland Shoff | | at (³²¹ | 960-5476 de & Daytime Telephone Number |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | or the 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) |
| Amo Div P.O | iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314 | Ameno Divisio Clifton | Address Iment Section on of Corporations Building Executive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| Shoft Insurance II, Inc. | | |
|---|--|------------------|
| (Name of Corporation as curren | ntly filed with the Florida Dept. of State) | |
| P11000074140 | | |
| (Document Number | of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation: | is Florida Profit Corporation adopts the following a | mendment(s) |
| A. If amending name, enter the new name of the corporation: | | |
| Shoff Insurance, Inc. | T | he new |
| name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must con | |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | |
| | | 20 |
| | | |
| C. Enter new mailing address, if applicable: | <u>्</u> रव्यक्ति । विकास | |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | 1.75 | S — [|
| | | <u> </u> |
| | ·= · · · | 12 D |
| | Tien. | <u></u> |
| D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre | dress in Florida, enter the name of the | - |
| | <u></u> | |
| Name of New Registered Agent | | |
| (Fladda | | |
| (rioriau s | street address) | |
| New Registered Office Address: | (City) , Florida (Zip Coa | da) |
| | (City) (Zip Cod | ie) |
| | | |
| New Registered Agent's Signature, if changing Registered Agen | | |
| I hereby accept the appointment as registered agent. I am familia | r 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 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 | PT | John Doe | |
|----------------------------|--------------|----------------|--|
| X Remove | <u>v</u> | 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 | VP | Michelle Shoff | 1202 Vestavia Circle |
| Add | | | Melbourne, FL 32940 |
| XX Remove | | | |
| 2) Change | | | |
| Add | | | ·-···································· |
| Remove | | | |
| 3) Change | | | |
| Add | | | , |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | <u></u> |
| 5) Change | | | <u></u> |
| Add | | | <u> </u> |
| Remove | | | |
| 6) Change | | | |
| Add | | | <u></u> |
| Remove | | | |

| an amendment provides for an exchange, | reclassification, or cancellation of issued shares, on the interpretation of itself: |
|--|--|
| (if not applicable, indicate N/A) | |
| | |
| | |
| | |
| | |
| | |
| | |

| The date of each amendment(s) a date this document was signed. | doption: | , if other than the |
|--|---|----------------------|
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the De | block does not meet the applicable statutory filing requirements, this date will epartment of State's records. | not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adby the shareholders was/were so | opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval. | |
| | proved by the shareholders through voting groups. The following statement reach 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) | |
| | (voting group) | |
| ☐ The amendment(s) was/were add action was not required. | opted by the board of directors without shareholder action and shareholder | |
| ☐ The amendment(s) was/were add action was not required. | opted by the incorporators without shareholder action and shareholder | |
| 9-26-2016 Dated | | |
| Signature | | |
| selecte | lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court eted fiduciary by that fiduciary) | |
| | Roland Shoff | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |