(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone i	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	Certificates of	of Status
Special Instructions to	Filing Officer:	
		1

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R. WHITE

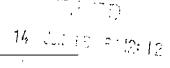
COVER LETTER

TO: Amendment Section

Division of Corporations			
NAME OF CORPORATION: Keystone	Adjusting Inc.		
DOCUMENT NUMBER: P1100007973	39		
The enclosed Articles of Amendment and fee are s			
Please return all correspondence concerning this ma	atter to the following:		
Jason Anderson			
	Name of Contact Persor	1	
Keystone Adjust			
-	Firm/ Company		
7507 HUMBOLD	T AVE		
	Address		
NEW PORT RIC	HEY, FI 34655		
	City/ State and Zip Cod	e	
jason@keystoneins	urance.net		
	used for future annual report	notification)	
For further information concerning this matter, plea	ase call:		
Jason Anderson	at (727	514-1975 de & Daytime Telephone Number	
Name of Contact Person	Area Co	de & 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 & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street	Address	
Amendment Section	Ameno	Amendment Section	
Division of Corporations Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314		Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



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

KEYSTONE ADJUSTING INC

nent(s) to

its Articles of Incorporation:			
A. <u>If amending name, enter the new name of the</u> JSA Holdings Inc.	e corporation:		
name must be distinguishable and contain the	word "corporation" "compa		he ne raviati
"Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	orp," "Inc." or "Co". A pro		
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A			
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX</u>)		
		<u></u>	
D. If amending the registered agent and/or regi		da, enter the name of the	
new registered agent and/or the new register	red office address:		
Name of New Registered Agent			
	(Florida street address)		
New Products of Constitution	(1 torius sireet uauress)	374 a.u.t. ku	
New Registered Office Address:	(City)	Florida(Zip Code)	
New Registered Agent's Signature, if changing	Desistand Agents		

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add Remove			
2) Change	. <u>. </u>		
Add			
3) Change			
Add Remove			
4) Change			
Add			
Remove			
5) Change			
Remove			
6) Change			
∧dd			
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
	-
· · · · · · · · · · · · · · · · · · ·	
	
<u> </u>	
If an amendment provides for an excl	change, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:
provisions for implementing the ame	endment if not contained in the amendment itself:

The date of each amendment(s	adoption: June 12th, 2014	, if other than th
date this document was signed.		
Effective date if applicable:	une 12th, 2014	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
action was not required.		
Dated	12/14	
Signature	/M	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	Tason M. Anderson (Typed or printed name of person signing)	
	Pre Sident	
	(Title of person signing)	