711000/04398

(Re	questor's Name)	
(Ad	dress)	<u> </u>
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
· · · · · · · · · · · · · · · · · · ·		
(Do	cument Number)	
Saddified Continu	Cantification	and Observe
Certified Copies	_ Certificates	s or Status
Special Instructions to	Filing Officer:	
		·
	055 11 0	

Office Use Only



100215057961

12/19/11--01012--024 **52.50

COLIVE DATE

MILIDEC 19 AMIT: 17



2-3011

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: J&C Insurance Solutions, INC
DOCUMENT NUMBER: P1600104398
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tay Wolfberg Name of Contact Person
Name of Contact Person
JRC Insurance Solutions Firm/Company
Firm/ Company
COS3 Old court rd # 303 Address
Address
Boca Ration FL 33433 City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
2 man address (to so used for fature difficult for from earlier)
For further information concerning this matter, please call:
Tay Wolfberg at (\frac{160}{\text{Name of Contact Person}} at (\frac{160}{\text{None of Contact Person}} \text{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 Certificate of Status Certified Copy (Additional Copy is enclosed) □ \$43.75 Filing Fee & □ \$43.75 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



J&C Insurance Solut	tions
(Name of Corporation as currently filed wi	th the Florida Dept. of State)
P11000104395	8 1/p 4 A
(Document Number of Corpo	oration (if known)
Pursuant to the provisions of section 607.1006, Florida Statuts Articles of Incorporation:	ith the Florida Dept. of State) Soration (if known) tes, this Florida Profit Corporation adopts the following american and the following american adopts the following ad
A. If amending name, enter the new name of the corpora	
	The new
	rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the viation "P.A."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	ice address in Florida, enter the name of the address:
Name of New Registered Agent	
New Registered Office Address:	rorida street address), Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fo	
Signature of New Regi	istered 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: <u>X</u> Change	<u>PT</u> John	<u>Doe</u>	
X Remove	V Mike	e Jones	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add Remove	PTD	Jay R. Wolfberg	6053 Old court rd # 303 BOCA RATON, FL 33433
2) Change Add Remove			
3) Change Add Remove			
Change Add Remove			
Change Add Remove		,	
6) Change Add Remove			

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
,	
,	
	
n amendment provides for an exchange provisions for implementing the ame	ge, 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)	Page 3 of 42-14/11
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e 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 ca	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required. The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated 12/14	-1/11
selec	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 binted fiduciary by that fiduciary)
	Typed or printed name of person signing)
	Tncorporator (Title of person signing)