P12000009621

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Diversified I	Benefit Consultar	nts of Florida, Inc.
DOCUMENT NUMBER: P1200000962		· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment and fee are su		
Please return all correspondence concerning this ma	tter to the following:	
Robert W. Bivins,	, Esq.	
	Name of Contact Person	
Bivins & Hemenw	vay, P.A.	
	Firm/ Company	
1060 Bloomingda	ıle Ave.	
	Address	
Valrico, Florida 3	33596	
	City/ State and Zip Code	
bbivins@bhpalaw.co	m	
	sed for future annual report	notification)
·	•	•
For further information concerning this matter, pleas	se call;	
Michael Matthews	_{at (} 813	, 413-8867
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:
\$35 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	Amendi Division Clifton 2661 Ex	Address ment Section n of Corporations Building kecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

Diversified Benefit Consultants of Florida, Inc.	
(Name of Corporation as currently filed with the Florida Dept. of S	<u>State</u>)
P12000009621	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Coits</i> Articles of Incorporation:	orporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
Fidelity Risk Management, Inc.	The new
name must be distinguishable and contain the word "corporation," "company," "Corp.,", "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional "chartered," "professional association," or the abbreviation "P.A."	or "incorporated" or the abbreviation
B. Enter new principal office address, if applicable:	-31
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	FILED FEB 13 AM 10:
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	5
	<u> </u>
	*
D. If amending the registered agent and/or registered office address in Florida, e new registered agent and/or the new registered office address:	enter the name of the
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:	, Florida
(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 to	he obligations of the position.
Signature of New Registered Agent, if changing	φ

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	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change				·
Add				
Remove				
3) Change	 			
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		-		
Add				
Damova			•	

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ı/a	
	the state of the s
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, and amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
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provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:

The date of each amendment(s) add	option: Q-6-1
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted action was not required.	ted by the incorporators without shareholder action and shareholder
_{Dated} Februa	ry 6, 2013
Signature	Mushus
	ector, president or other officer if directors or officers have not been
	by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
	Michael N. Matthews
	(Typed or printed name of person signing)
· ·	President
	(Title of person signing)