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SECRETARY OF STATE

MAR 0:5 2012 T. ROBERTS TO: Amendment Section Division of Corporations

NAME OF CORPORA	rion: Signature A	Assurance Grou	p, Inc
DOCUMENT NUMBER	R:		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ndence concerning this ma	tter to the following:	
C	lifford Barnhart		
		Name of Contact Person	1
S	ignature Assura		
<del></del>	<u> </u>	Firm/ Company	
1	331 N Palm Ave	- ·	
		Address	
P	embroke Pines	Florida, 33026	
		City/ State and Zip Cod	e
shan	ebarnhart@gma E-mail address: (to be us	ail.com ed for future annual report	notification)
For further information co	oncerning this matter, pleas	se call:	
Clifford Barnha	ırt	<sub>at (</sub> 954	<sub>_)</sub> 554-5216
Name of C	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e 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)
Amend Division P.O. Bo	g Address ment Section of Corporations ox 6327 ssee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## **Articles of Amendment** Articles of Incorporation



(Document Number of Corporation (if known)

suant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

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ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "Cord "chartered," "professional association," or	Corp," "Inc," or "Co". A profe		rated" or the abb
. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	E BOX)	<u> </u>	
Mailing address MAY BE A POST OFFICE  If amending the registered agent and/or reg new registered agent and/or the new registered	zistered office address in Florida ered office address:		e of the
Mailing address MAY BE A POST OFFICE  If amending the registered agent and/or reg new registered agent and/or the new registered	ristered office address in Florida		e of the
(Mailing address MAY BE A POST OFFICE  If amending the registered agent and/or reg new registered agent and/or the new registered	zistered office address in Florida ered office address:		e of the
(Mailing address MAY BE A POST OFFICE  If amending the registered agent and/or registered agent and/or the new registered.)	zistered office address in Florida ered office address:		· · · · · · · · · · · · · · · · · · ·

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> <u>J</u>	ohn Doe	
X Remove	<u>V</u> <u>N</u>	Mike Jones	
X Add	<u>sv</u> s	sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	, <u>Addres</u> s
1) × Change Add Remove	president	Clifford Barnhart	4196 SW 87th Ter Davie, Florida 33328
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove		·	
5) Change Add Remove		·	
6) Change Add Remove			

	r adding addition nal sheets, if nece	ssary). (Be	specific)			
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provisions for	ent provides for a r implementing to plicable, indicate	<u>he amendmen</u>	reclassification	on, or cancell ined in the a	ation of issued s	shares,
					<del></del>	

The date of each amendment(s) ad	loption: 02/22/2012
Effective date if applicable:	
•	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement 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 ado action was not required.	pted by the board of directors without shareholderaction and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated_02/22/2	2012
Signature !	WINT -
selected	rector, president or other officer – if directors or officers have not been i, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Clifford Barnhart
-	(Typed or printed name of person signing)
	President
_	(Title of person signing)