

P12000050075

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

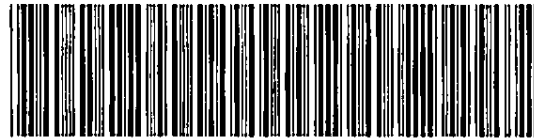
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: TIMCO Insurance Services Inc

DOCUMENT NUMBER: PIR000050075

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dr. Timothy J. Franklin  
Name of Contact Person

TIMCO Insurance Services, Inc  
Firm/ Company

4830 West Kennedy Blvd.  
Address

Tampa FL 33609  
City/ State and Zip Code

mtimothyjfranklin@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dr. Timothy J. Franklin at ( 773 ) 981-2547  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|--|---|---|--|

Mailing Address

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

Timco Insurance Services, Inc

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

PL2000050075

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

N/A

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

Florida

(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 the obligations of the position.*

Signature of New Registered Agent, if changing

**Check if applicable**

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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                      V              Mike Jones

X Add                      SV              Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>Change</u> <u>  </u> Add <u>X</u> Remove	<u>VPO</u>	<u>Dennis Fontenot Sr</u>	<u>4830 West Kennedy Blvd</u> <u>Tampa FL 33609</u>
2) <u>Change</u> <u>  </u> Add <u>X</u> Remove	<u>S</u>	<u>Shae Wasmoundt</u>	<u>4830 West Kennedy Blvd</u> <u>Tampa FL 33609</u>
3) <u>Change</u> <u>  </u> Add <u>X</u> Remove	<u>SE</u>	<u>Tania Zambrano</u>	<u>4830 West Kennedy Blvd</u> <u>Tampa FL 33609</u>
4) <u>Change</u> <u>  </u> Add <u>X</u> Remove	<u>VPM</u>	<u>Jason Yarnitz</u>	<u>4830 West Kennedy Blvd</u> <u>Tampa FL 33609</u>
5) <u>Change</u> <u>  </u> Add <u>X</u> Remove	<u>DIA</u>	<u>Benjamin Gerdas Sr</u>	<u>4830 West Kennedy Blvd</u> <u>Tampa FL 33609</u>
6) <u>Change</u> <u>  </u> Add <u>X</u> Remove	<u>DCF</u> <del><u>DTM</u></del>	<u>Kenneth Ochala Sr</u>	<u>4830 West Kennedy Blvd</u> <u>Tampa FL 33609</u>

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(Attach additional sheets, if necessary)

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☒ Change      PT      John Doe

☐ Remove      V      Mike Jones

☐ Add      SV      Sally Smith

Type of Action  
(Check One)

Title

Name

Address

1) ☐ Change

DLM

Justin Stamatis

4830 West Kennedy Blvd  
Tampa FL 33609

☐ Add

☒ Remove

2) ☐ Change

DRM

Jordan Yates

4830 West Kennedy Blvd  
Tampa FL 33609

☐ Add

☒ Remove

3) ☐ Change

CFO

Matt Zubi

2202 N West Shore Blvd  
Tampa FL 33607

☐ Add

☒ Remove

4) ☐ Change

A

Danny Allday

2202 N. West Shore Dr  
Tampa FL 33607

☐ Add

☒ Remove

5) ☐ Change

AT

Ernesto Borges

2202 N West Shore Dr  
Tampa FL 33607

☐ Add

☒ Remove

6) ☐ Change

AT

Mary Sparrow

2202 N West Shore Dr  
Tampa FL 33607

☐ Add

☒ Remove

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(Attach additional sheets, if necessary)

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X Remove                      V              Mike Jones

X Add                      SV              Sally Smith

Type of Action  
(Check One)

Title

Name

Address

1) Change

At

Alan Meserow

2202 N West Shore Dr

Add

Tampa FL 33607

X Remove

2) X Change

P

Dr. Timothy Franklin

4830 West Kennedy Blvd

Add

Tampa FL 33609

Remove

3) Change

V

Dr. Timothy Franklin

4830 West Kennedy Blvd  
Tampa FL 33609

X Add

Remove

4) X Change

V

Dr. Danielle Gutierrez

4830 West Kennedy Blvd

Add

Tampa FL 33609

Remove

5) Change

P

Dr. Danielle Gutierrez

4830 West Kennedy Blvd

X Add

Tampa FL 33609

Remove

6) Change

Add

Remove

(Attach additional sheets, if necessary). (Be specific)

(if not applicable, indicate N/A)

Please change the title of Dr. Timothy J. Franklin to Vice President and change Dr. Danielle Gutierrez title to President, and delete all other names.

The date of each amendment(s) adoption: 11/9/20, if other than the date this document was signed.

Effective date if applicable: 11/9/20  
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)

Dated 11/9/20

Signature Danielle Gutierrez  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Danielle Gutierrez  
(Typed or printed name of person signing)

President  
(Title of person signing)