## P12000064141

(Red	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	<del>= #</del> )
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DIVISION OF CORPORATIONS

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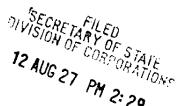
AUG 2 8 2012 T. BROWN

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Peter Brooke & Associates, Inc.  DOCUMENT NUMBER: P12000064141				
	of Amendment and fee are su			
Please return all corres	spondence concerning this ma	tter to the following:		
	Jon D. Blakesberg, CPA			
	Name of Contact Person			
	Blakesberg & Company, CPA's			
		Firm/ Company		
	951 SW 4th Avenue			
		Address		
	Boca Raton, FI 3	33432-5803		
		City/ State and Zip Code	,	
Ма	ria@blakesbergc <sub>l</sub>	nas com		
		sed for future annual report	notification)	
	•	•	•	
For further informatio	n concerning this matter, pleas	se call:		
Jon D. Blakesberg				
Name of Contact Person		Area Coo	le & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	noveble to the Floride Dene	riment of States	
Enclosed is a check to	the following amount made	payable to the Florida Depa	ithem 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)	
	ling Address	Street.	Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle			<del>Q</del>	
			ssee, FL 32301	

## Articles of Amendment to Articles of Incorporation of



Peter Brooke & Associates In	nc		·	' <: 2g
(Name of Corporation as current	ly filed with the Florid	a Dept. of State)	<del></del>	
P12000064141				
(Document Numbe	er of Corporation (if kno	wn)		
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this <i>Flort</i>	da Profit Corporation ado	pts the following a	amendment(s) to
A. If amending name, enter the new name of th	e corporation:			
Carethon Insurance Group, Inc	C.		7	The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp," "Inc," or "Co".	A professional corporati	ated" or the abb	reviation
B. Enter new principal office address, if application (Principal office address MUST BE A STREET A	able: A <i>DDRESS</i> )			
	-			
	_			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u> )			
D. If amounting the social state of the social	- 1 00 11 1			
<ul> <li>If amending the registered agent and/or registered agent and/or the new registered.</li> </ul>		n Florida, enter the name	<u>of the</u>	
Name of New Registered Agent				
	(Florida street ac	idress)		
New Registered Office Address:		, Florida		
	(City)	,,	(Zip Code)	
New Registered Agent's Signature, if changing	Registered Agent:			
I hereby accept the appointment as registered age		and accept the obligations	of the position.	
Signatura	of New Panistayed Agen	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 Do	<u>90</u>	
X Remove	<u>v</u>	Mike Jo	ne <u>s</u>	
_X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	***	<del>-</del>		
Add				
Remove				
2) Change		_		
Add		_		
Remove				
3) Change				
, Add		_		
Remove				
,				
4) Change		_		
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change		_		
Add				
Damoua				

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
)	
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and if not contained in the amendment itself:
	•
-	

The date of each amendment(s) adoption: August 21, 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 adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
☐ The amendment(s) was/were approx must be separately provided for each	ved by the shareholders through voting groups. The following statement ch 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)	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	ed by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated August 2	21, 2012	
Signature	1800	
selected, b	ctor, 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 fiduciary by that fiduciary)	
<u>P</u>	eter Brooke	
	(Typed or printed name of person signing)	
P	resident	
	(Title of person signing)	