

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	-
PICK-UF	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of 9	Status
Special Instructions	s to Filing Officer:	
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Office Use Only



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18 JUL -9 AM 6: 18

And

R. WHITE JUL 1 1 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: INSHVAND	e Brokers Diced	t Inc
DOCUMENT NUMB	ER: <u>17200006</u>	5 136	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
	Sc	An Young	
-	<u></u>	Name of Contact Perso	n
-	Insurance Y	Birly Company	16
-	<u> </u>	Sweetziass St.	
		- Audiess	
-	LOXAN	Krihtt, FL, 334 - City/ State and Zip Cod	0
	SEANKIB	PAVOTE. 10M sed for future annual report	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
•			
JUN)	love	at (5 6)	de & Daytime Telephone Number
Name of	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a cheek for	the following amount made	payable to the Florida Depa	ortment of State:
S35 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)
	ng Address		Address
	idment Section ion of Corporations		Iment Section on of Corporations
P.O. 1	Box 6327	Clifton	Building
I allal	nassee, FL 32314	2661 E	Executive Center Circle

Tallahassee, FL 32301

FILED

18 JUL -9 AM 9: 15

Articles of Amendment

Articles of Incorporation

The Royal Box Solver The (Name of Corporation as currently filed with the Florida Dept. of State)

(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:

			The r
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designat vord "chartered," "professional association	ion "Corp." "Inc " or "	'Co". A professional	"incorporated" or the abbrevial corporation name must contain
3. Enter new principal office address, if Principal office address MUST BE A STE		<u>NA</u>	
C. Enter new mailing address, if applica		NA	
(Mailing address <u>MAY BE A POST OI</u>	<u> </u>		
	or registered office add		the name of the
D. If amending the registered agent and/ new registered agent and/or the new	or registered office add registered office addres	<u>::</u>	the name of the
D. If amending the registered agent and/ new registered agent and/or the new	or registered office add registered office addres	51455 5} . Let address)	
D. If amending the registered agent and/ new registered agent and/or the new i Name of New Registered Agent	or registered office addres same SAME SIY Swut	51455 5} . Let address)	the name of the Florida 3347 b (Zip Code)

If antending 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 Doe			
X Remove	<u>V</u>	Mike Jones			
<u>X</u> Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change	MA			Action to the second se	
· Add	,				
Remove					
2) Change					
Add					·
Remove					
3) Change					
Add					
Remove					
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Add					
Remove					

vitacii aaanion	al sheets, if neces.	sary). (Be s	ресідіс)				
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<u>provisions for </u>	nt provides for a implementing the licable, indicate A	<u>e amendment</u> VA)	eclassification, if not contain	ed in the ameno	n of issued sh dment itself:	ares,	
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The date of each a	mendment(s) adoption:	1/3/2	.(18	, if other than
Effective date if an	•	7/3/2016		
		(no more than 90) days after amendmer	u file date)
Note: If the date is document's effective	nserted in this block doc e date on the Department	es not meet the application of State's records.	able statutory filing re	quirements, this date will not be listed as
Adoption of Amen	dment(s) (CHECK ONE)		
The amendment(by the sharehold	(s) was/were adopted by the lers was/were sufficient f	the shareholders. The or approval.	number of votes east f	or the amendment(s)
The amendment(must be separate	s) was/were approved by ely provided for each voi	the shareholders throu ing group entitled to v	agh voting groups. The ote separately on the o	e following statement unendment(s):
"The numb	er of votes east for the ar	mendment(s) was/were	sufficient for approve	ıl
by	(ш
		(voting group)		
The amendment action was not re	s) was/were adopted by t quired.	he board of directors v	vithout shareholder ac	tion and shareholder
. The amendment(action was not re	s) was/were adopted by t quired.	he incorporators withe	out shareholder action	and shareholder
D	ated $\frac{7 3 20}{}$	18		
Si	gnature	- V. Y.		
	(By a director, p	resident or other office	r - if directors or offic	ers have not been
	selected, by an i appointed fiduci	ncorporator – in the ary by that fiduciary)	hands of a receiver, tr	ustee, or other court
		Sein P. Y	D/W nine of person signing	
		(Typed or printed na	ime of person signing)	
		registered	ymt	
		- Clitte or	nerson sioning)	