

P12000092716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

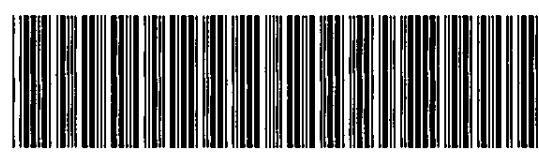
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800241130218

11/29/12--01012--004 **105.00

RECEIVED
12 NOV 29 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2012 NOV 29 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
11/29/12
[Signature]



1000 Ponce de Leon Blvd. Suite: 105
Coral Gables, FL 33134
Phone: 305-444-4994
Email: filing@ecfsfiling.com

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

1. Endeavor Insurance & Financial
(CORPORATE NAME) (DOCUMENT #) group Inc.

2. (912000092716)
(CORPORATE NAME) (DOCUMENT #)

3. _____
(CORPORATE NAME) (DOCUMENT #)

☐ Walk-In

☒ Pick up time: _____

☐ Certified Copy

☐ Certificate Of Status

New Filings	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Other:

Amendments	
<input checked="" type="checkbox"/>	Amendments
<input type="checkbox"/>	Resignation
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Other:

Other Filings	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Apostille:
<input type="checkbox"/>	Other:

Examiners Initials

FILED
2012 NOV 29 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

ENDEAVOR INSURANCE & FINANCIAL GROUP INC

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

P12000092716

(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:

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**)

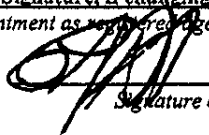
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent **EDUARDO HERNANDEZ**
3332 SOUTH UNIVERSITY DR
(Florida street address)

New Registered Office Address: **MIRAMAR**, Florida **33025**
(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 the obligations of the position.



Signature of New Registered Agent, 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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	P	NANCY ALBEAR	3332 SOUTH UNIVERSITY DR
<input type="checkbox"/> Add			MIRAMAR, FL 33025
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	P	EDUARDO HERNANDEZ	3332 SOUTH UNIVERSITY DR
<input checked="" type="checkbox"/> Add			MIRAMAR, FL 33025
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

1. *Introduction*
 2. *Background*
 3. *Methodology*
 4. *Results*
 5. *Discussion*
 6. *Conclusion*
 7. *References*
 8. *Appendix*
 9. *Glossary*
 10. *Index*
 11. *Table of Contents*
 12. *Figure 1*
 13. *Figure 2*
 14. *Figure 3*
 15. *Figure 4*
 16. *Figure 5*
 17. *Figure 6*
 18. *Figure 7*
 19. *Figure 8*
 20. *Figure 9*
 21. *Figure 10*
 22. *Figure 11*
 23. *Figure 12*
 24. *Figure 13*
 25. *Figure 14*
 26. *Figure 15*
 27. *Figure 16*
 28. *Figure 17*
 29. *Figure 18*
 30. *Figure 19*
 31. *Figure 20*
 32. *Figure 21*
 33. *Figure 22*
 34. *Figure 23*
 35. *Figure 24*
 36. *Figure 25*
 37. *Figure 26*
 38. *Figure 27*
 39. *Figure 28*
 40. *Figure 29*
 41. *Figure 30*
 42. *Figure 31*
 43. *Figure 32*
 44. *Figure 33*
 45. *Figure 34*
 46. *Figure 35*
 47. *Figure 36*
 48. *Figure 37*
 49. *Figure 38*
 50. *Figure 39*
 51. *Figure 40*
 52. *Figure 41*
 53. *Figure 42*
 54. *Figure 43*
 55. *Figure 44*
 56. *Figure 45*
 57. *Figure 46*
 58. *Figure 47*
 59. *Figure 48*
 60. *Figure 49*
 61. *Figure 50*
 62. *Figure 51*
 63. *Figure 52*
 64. *Figure 53*
 65. *Figure 54*
 66. *Figure 55*
 67. *Figure 56*
 68. *Figure 57*
 69. *Figure 58*
 70. *Figure 59*
 71. *Figure 60*
 72. *Figure 61*
 73. *Figure 62*
 74. *Figure 63*
 75. *Figure 64*
 76. *Figure 65*
 77. *Figure 66*
 78. *Figure 67*
 79. *Figure 68*
 80. *Figure 69*
 81. *Figure 70*
 82. *Figure 71*
 83. *Figure 72*
 84. *Figure 73*
 85. *Figure 74*
 86. *Figure 75*
 87. *Figure 76*
 88. *Figure 77*
 89. *Figure 78*
 90. *Figure 79*
 91. *Figure 80*
 92. *Figure 81*
 93. *Figure 82*
 94. *Figure 83*
 95. *Figure 84*
 96. *Figure 85*
 97. *Figure 86*
 98. *Figure 87*
 99. *Figure 88*
 100. *Figure 89*
 101. *Figure 90*
 102. *Figure 91*
 103. *Figure 92*
 104. *Figure 93*
 105. *Figure 94*
 106. *Figure 95*
 107. *Figure 96*
 108. *Figure 97*
 109. *Figure 98*
 110. *Figure 99*
 111. *Figure 100*
 112. *Figure 101*
 113. *Figure 102*
 114. *Figure 103*
 115. *Figure 104*
 116. *Figure 105*
 117. *Figure 106*
 118. *Figure 107*
 119. *Figure 108*
 120. *Figure 109*
 121. *Figure 110*
 122. *Figure 111*
 123. *Figure 112*
 124. *Figure 113*
 125. *Figure 114*
 126. *Figure 115*
 127. *Figure 116*
 128. *Figure 117*
 129. *Figure 118*
 130. *Figure 119*
 131. *Figure 120*
 132. *Figure 121*
 133. *Figure 122*
 134. *Figure 123*
 135. *Figure 124*
 136. *Figure 125*
 137. *Figure 126*
 138. *Figure 127*
 139. *Figure 128*
 140. *Figure 129*
 141. *Figure 130*
 142. *Figure 131*
 143. *Figure 132*
 144. *Figure 133*
 145. *Figure 134*
 146. *Figure 135*
 147. *Figure 136*
 148. *Figure 137*
 149. *Figure 138*
 150. *Figure 139*
 151. *Figure 140*
 152. *Figure 141*
 153. *Figure 142*
 154. *Figure 143*
 155. *Figure 144*
 156. *Figure 145*
 157. *Figure 146*
 158. *Figure 147*
 159. *Figure 148*
 160. *Figure 149*
 161. *Figure 150*
 162. *Figure 151*
 163. *Figure 152*
 164. *Figure 153*
 165. *Figure 154*
 166. *Figure 155*
 167. *Figure 156*
 168. *Figure 157*
 169. *Figure 158*
 170. *Figure 159*
 171. *Figure 160*
 172. *Figure 161*
 173. *Figure 162*
 174. *Figure 163*
 175. *Figure 164*
 176. *Figure 165*
 177. *Figure 166*
 178. *Figure 167*
 179. *Figure 168*
 180. *Figure 169*
 181. *Figure 170*
 182. *Figure 171*
 183. *Figure 172*
 184. *Figure 173*
 185. *Figure 174*
 186. *Figure 175*
 187. *Figure 176*
 188. *Figure 177*
 189. *Figure 178*
 190. *Figure 179*
 191. *Figure 180*
 192. *Figure 181*
 193. *Figure 182*
 194. *Figure 183*
 195. *Figure 184*
 196. *Figure 185*
 197. *Figure 186*
 198. *Figure 187*
 199. *Figure 188*
 200. *Figure 189*
 201. *Figure 190*
 202. *Figure 191*
 203. *Figure 192*
 204. *Figure 193*
 205. *Figure 194*
 206. *Figure 195*
 207. *Figure 196*
 208. *Figure 197*
 209. *Figure 198*
 210. *Figure 199*
 211. *Figure 200*
 212. *Figure 201*
 213. *Figure 202*
 214. *Figure 203*
 215. *Figure 204*
 216. *Figure 205*
 217. *Figure 206*
 218.

[illegible]

The date of each amendment(s) adoption: 11-20-2012

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. 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):*

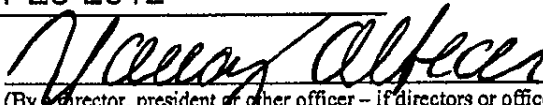
"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"
(voting group)

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 11-20-2012

Signature



(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)

NANCY ALBEAR

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)