P12000104342

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: $\underline{\underline{\hspace{1cm}}}^{\text{CNW-INSURANCE-CORP}}$ DOCUMENT NUMBER: P12000104342 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: WILLIAM FERNANDEZ Name of Contact Person GNW INSURANCE CORP Firm Company 5827 LAKE WORTH RD Address LAKE WORTH, FL 33463 City State and Zip Code WILL JAMIA GNWINSURANCECORP.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: WILLIAM FERNANDEZ Nume of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■\$52,50 Filling Fee ☐ \$43.75 Filing Fee & ☐ \$35 Filling Fee ■\$43.75 Filing Fee & Certified Copy Certificate of Status Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) 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 Articles of Incorporation of

CNW INSERDANCE CORD

CHAN THISORANCE, CORT				
(<u>Name</u>	of Corporation as currently	g filed with the Florida C	Dept. of State)	
P12000104342				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	,1006, Florida Statutes, this I	Florida Profit Corporatio.	$m{n}$ adopts the following a	amendmentis) t
A. If amending name, enter the new n	ame of the corporation:			
NeA			τ	he new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	"orp," "Inc," or "Co" A		ed" or the abbreviation	Corp."
B. Enter new principal office address, (Principal office address MUST BE A S		NA		
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>		N'A		76 July 17
D. If amending the registered agent ar	•		name of the	PH 12: 18
new registered agent and/or the new	w registered office address:			
Name of New Registered Agent	WILLIAM FERNANDEZ			
	16086 E CALDER DR			
	d lorida sire	vet addressi		
New Registered Office Address;	LONAHATCHEE		. Florida 33470	
		(Chy)		le)

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position

Granture 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)

Example:

Please note the officer director title by the first letter of the office title:

P. President, V. Vice President; T. Treusurer, 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, Treusurer, Director would be PTD.

Changes should be noted in the following manner: Currently John Doc is listed as the PSF 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

X Change	<u>P1</u>	<u>John Doc</u>	
X Remove	\underline{V}	Mike Jones	
X Add	<u>8V</u>	<u>Sally Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change	P	i.OURDES FERNANDEZ	5827 LAKE WORTH RD
Add			GREENACRES, FL 33463
$\frac{X}{\underline{\qquad}}$ Remove 2) $\frac{X}{\underline{\qquad}}$ Change	P	WILLIAM FERNANDEZ	7918 BLAIRWOOD CIR
Add			LAKE WORTH, FL 33467
Add			
Remove			
Add Remove			
51 Change			
Add Remove			
6) Change			
Add			
Remove			

	additional sheets, if necessary) — (Be specific)
/A	
provis	nendment provides for an exchange, reclassification, or cancellation of issued shares. ions for implementing the amendment if not contained in the amendment itself:
(<i>įt</i>	not applicable, indicate NAY
·A	

. . .

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
tho more than 90 days after amendment tile date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	n(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s)	ment
"The number of votes cast for the amendment(s) was were sufficient for approval	
by	
evoting group	
\square The amendment(s) is are being filed pursuant to s. 607.0120 (£1) (e), F.S.	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder acation was not required.	ction and shareholder
01/10/2020	
Signature Dated	
(By a director, president or other officer – it directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other co appointed (iduciary by that tiduciary)	
WILLIAM FERNANDEZ	
Clyped or printed name of person signing)	
VICE PRESIDENT	
(Title of person signing)	