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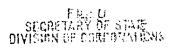
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: $\underline{}^{T}$	HE INSURANCE	DOCTOR, INC.	
DOCUMENT NUMBER: P1300	0006279		
The enclosed Articles of Amendme	ent and fee are sub	omitted for filing.	
Please return all correspondence co	oncerning this mat	ter to the following:	
IAN ILLYC	CH MARTINEZ, I	ESQ.	
		Name of Contact Person	1
BELLO & !	MARTINEZ, PLL	C.	
		Firm/ Company	
800 DOUG	LAS ROAD, SUI		
		Address	
CORAL GA	CORAL GABLES FL 33134		
		City/ State and Zip Code	e
imartinez@bmrla	wgroup.com		
_	•	ed for future annual report	notification)
	`	•	•
For further information concerning	this matter, please	e call:	
IAN ILLYCH MARTINEZ, ESQ.		at (442-7970
Name of Contact Pe	erson	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following	ng amount made p	ayable to the Florida Depa	artment of State:
-	'5 Filing Fee & ficate 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)
Mailing Addres Amendment Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion orations	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



THE INSURANCE DOCTOR, INC.

15 SEP 14 PM 2: 13

umber of Corporation (if known) tes, this Florida Profit Corporation adopts the following amendmen
• • •
tes, this Florida Profit Corporation adopts the following amendmen
tion:
The new
rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the viation "P.A."
N/A
N/A
ice address in Florida, enter the name of the address:

lorida street address)
, Florida
(City) (Zip Code)
l Agent: amiliar with and accept the obligations of the position.
with and accept the congulations of the position.
i a

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 Doe		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	EV	ROBERTO MARTINEZ	15280 NW 79 CT	
X Add			SUITE 103	
Remove			MIAMI LAKES, FL 33016	
2) Change	V	RAUL SAHAGUN	15280 NW 79 CT	
X Add			SUITE 103	
Remove			MIAMI LAKES, FL 33016	
3) Change	V	MARIO DIAZ	15280 NW 79 CT	
X Add			SUITE 103	
Remove			MIAMI LAKES, FL. 33016	
4) Change				
Add			<u></u>	
Remove				
5) Change				
Add				
Remove				
6) Change	<u> </u>			
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
	
F. 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 an analysis
N/A	

09/01/2015 The date of each amendment(s) adoption: if other than the date this document was signed. 09/01/2015 Effective date if applicable: (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 shareholders. The number of votes east 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 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 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) FERNANDO ESPINOSA, JR. (Typed or printed name of person signing) PRESIDENT

(Title of person signing)