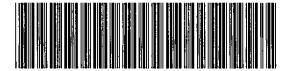
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: UNITED INSU	RANCE & FINANC	IAL ADVISORS INC
DOCUMENT NUMBER: P13000039903	3	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
MARIA E RUIZ		
L & M ACCOUNT	Name of Contact Person	•
	Firm/ Company	
8961 SW 27 STRI	EET	
	Address	
MIAMI FLORIDA :	33193	
	City/ State and Zip Code	e
MARIAQUIROS9@H	OTMAIL.COM	
E-mail address: (to be use		notification)
	·	
For further information concerning this matter, please	call:	•
MARIA E RUIZ	at (305	, 595-2407
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made pa	ayable to the Florida Depa	urtment of State:
\$35 Filing Fee \$\text{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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

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UNITED INSURANCE & FINANCIAL ADVISORS INC

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

P13000039903	THE WAR THE T	orida Dept. or State)		, _
(Document N	lumber of Corporation (if	known)		_
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this I	Florida Profit Corporation	n adopts the follow	ving amendment(s) to
A. If amending name, enter the new name	of the corporation:			
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	on "Corp," "Inc," or "(Co". A professional corp	orporated" or the poration name mu	The new abbreviation st contain the
B. Enter new principal office address, if a	pplicable:	89615.	w. 27 H.	
(Principal office address <u>MUST BE A STR</u>		8961 S.a mian; f	7 33165	<u> </u>
	44.			
C. Enter new mailing address, if applicat	; ; ; ·			
(Mailing address MAY BE A POST OF			·	·
	:		•	
		· · · · · ·		
	•			
D. If amending the registered agent and/o	r registered office addr	ess in Florida, enter the	name of the	
new registered agent and/or the new re	egistered office address:			
Name of New Registered Agent	Armando t	Micewao		
Name of New Registered Agent New Registered Office Address:	8961 5.6	1. 27 Street		
	(Florida stre	eet address)		
New Registered Office Address:	miami	, Flor	rida33/a	5
	(City)		(Zip Code)	
	₄ 1			
New Registered Agent's Signature, if char	nging Registered Agent:			
I hereby accept the appointment as registere	dagent. I am familiar w	with and accept the obligation.	tions of the positio	n.
	ture of New Registered 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 <math>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	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	ARMANDO E ACEVEDO	8961 SW 27 STREET
X_{Add}		MIAMI FLORIDA 33165
Remove		
2) Change	1 Maria E. Ruiz	10430 S.W. 145 Are Miami, FL 33183
Add		Miami, FL 33/83
Remove		· · · · · · · · · · · · · · · · · · ·
3) Change		
Add		
Remove		
4) Change	- Contract of the Contract of	
Add		
Remove		
5) Change		· · · · · · · · · · · · · · · · · · ·
Add		
Remove		
6) Change		
Add		
Remove		

f amending or adding additional Arti- Attach additional sheets, if necessary).	
	· · ·
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
,	

The date of each amendment(s) adoption: 07/11/2013	, if other than the
date this document was signed. Effective date if applicable: 07/16/2013	, it outer that the
(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"	
☐ 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 07/11/2013	
Signature 3	
(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)	
MARIA E RUIZ	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)