P130000044750

(Re	equestor's Name)	
(Ad	Idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	





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Amendicc Manilis

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: IMAX INSU	JRANCE GROU	P CORP.
DOCUMENT NUMBER: P1300004475	50	
The enclosed Articles of Amendment and fee are su	abmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Abel S. Alvarez		
	Name of Contact Person	n
Imax Insurance (Group Corp.	
	Firm/ Company	
3800 SW 102 AV	/E #214	
	Address	
Miami, Florida 33	3165	
	City/ State and Zip Cod	e
insuranceimax@gma	ail.com	
	sed for future annual report	notification)
For further information concerning this matter, plea	se call:	
Abel S. Alvarez	at (305	, 519 3317
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
□ \$35 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)
Mailing Address	Street	Address
Amendment Section	Amendment Section	
·	Division of Corporations	
	Clifton Building	
rananassee, FL 32314		
	Ameno Divisio Clifton 2661 E	Iment Section on of Corporations

Articles of Amendment to Articles of Incorporation of

IMAX INSURANCE GRO			
	currently filed with the F	lorida Dept. of State)	
P13000044750			
(Documen	at Number of Corporation (i	f known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this a	Florida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
n/a			The new
	ation "Corp," "Inc," or "		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		10368 West Flagler Street	
		Miami, Florida 33174	
C. Enter new mailing address, if appli	cable:	n/a	· · · · · · · · · · · · · · · · · · ·
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	11/4	3
			9 70
D. If amending the registered agent an new registered agent and/or the new			3 UL -9 PH 1: 14
Name of New Registered Agent	Abel S. Alvarez		上
	3800 SW 102 A	VE #214	
	(Florida str	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	Miami	, Florida 33165	
	(City)	(Zip Code)	
	ered agent. Ann familiar v	t. with and accept the obligations of the position. Igent, 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: 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)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	DP	Abel S. Alvarez	3800 SW 102 AVE # 214
Add			Miami, Florida 33165
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	•		
Remove			

	(Be specific)
/a	
provisions for implementing the amo (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the amo (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adop	June 28, 2013
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.
	yed by the shareholders through voting groups. The following statement of 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)
	(voting group)
☐ The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder
Dated_June_28	ı. 2013
Dated	
Signature	
(By a direct	or, president or other officer – if directors or officers have not been
selected, b	y an incorporator – if in the hands of a receiver, trustee, or other court
appointed	fiduciary by that fiduciary)
Α	bel S. Alvarez
	(Typed or printed name of person signing)
D	rirector - President
	(Title of person signing)