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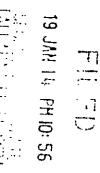
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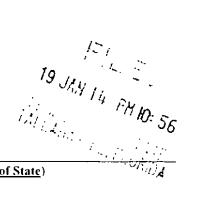
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: INCA INSURA	ANCE SERVICES, INC.	
DOCUMENT NUMBER: P13000071471		
The enclosed Articles of Amendment and fee are	e submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
MERCEDES EDITH MIS	MOSO	
	Name of Contact Person	
	Firm/ Company	
18125 NW 84 AVE		
-	Address	
HIALEAH, FL 33015		
	City/ State and Zip Code	<u> </u>
MERCYMIMOSO@YAHOO.0	COM	
E-mail address: (to b	e used for future annual report	notification)
For further information concerning this matter, p	lease call:	
MERCEDES EDITH MIMOSO	786	837-1779 de & Daytime Telephone Number
Name of Contact Person	Area Cou	le & Daytime Telephone Number
Enclosed is a check for the following amount ma	de payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee of Certificate of Statu		■\$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	Amend Division Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



INCA INSURANCE SERVICES, INC.

(<u>Name of</u>	Corporation as curren	tly filed with the Florida Dept. of Sta	te)
P13000071471			
 	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, thi	s Florida Profit Corporation adopts the	e following amendment(s) to
A. If amending name, enter the new name			
TIBURON INSURANCE BROKERS, INC			The new
name must he distinguishable and conta "Corp.," "Inc.," or Co.," or the designal word "chartered," "professional association	tion "Corp," "Inc," or	"Co". A professional corporation na	
B. Enter new principal office address, if	applicable:	6625 MIAMI LAKES DRIVE	
(Principal office address <u>MUST BE A ST</u>		SUITE 327	
		MIAMI LAKES, FL 33014	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		18125 NW 84 AVE	
		HIALEAH, FL 33015	
D. If amending the registered agent and new registered agent and/or the new			<u>c</u>
Name of New Registered Agent	MERCEDES EDITH MIMOSO		
	•		
-	(Florida :	(treet address)	
New Registered Office Address:	8125 NW 84 AVE HIA	LEAH, FL . Florid	33015
<u></u>		(City)	(Zip Code)
New Registered Agent's Signature, if cha I hereby accept the appointment as register			position.
Meire	des Trum		
7.00.00		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.

Mike Jones, V as Rem Example:	iove, and Sa	lly Smith, SV as an Add.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	5
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	MERCEDES EDITH MIMOSO	18125 NW 84 AVE
X Add			HIALEAH, FL 33015
Remove			
2) Change	VP	EFREM HERNANDEZ	2202 N 41 AVE
X Add			HOLLYWOOD, FL 33021
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
	<i>-</i> 2
	· · · · · · · · · · · · · · · · · · ·
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	•
f an amendment provides for an exchange, reclassification, or cancellation provisions for implementing the amendment if not contained in the amen	on of issued shares,
(if not applicable, indicate N/A)	idilient itseit.

	01/08/2019	
The date of each amendment(s) a	doption:	, if other than the
late this document was signed.	2010	
U170 Effective date <u>if applicable</u> :	08/2019	
	(no more than 90 days after amendment file do	ate)
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable statutory filing requirem epartment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the aufficient for approval.	amendment(s)
	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amenda	wing statement ment(s);
	for the amendment(s) was/were sufficient for approval	当当
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action an	d shareholder PH 0.56
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and sha	archolder
Dated		
Signature Z	Recealed Memory	
(By a d	lirector, president or other officer - if directors or officers has	
	ed, by an incorporator – if in the hands of a receiver, trustee, of ted fiduciary by that fiduciary)	or other court
	MERCEDES EDITH MIMOSO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	