P13000072207

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

APPROVED AND FILED

C. LEWIS

OCT 1 0 2013

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	American Ins BER: P1300007220	urance Products A	dvisors & Assoc Inc
	of Amendment and fee are su		
Please return all corres	spondence concerning this mat	ter to the following:	
	Guillermo Palacio	os Odiaga	
		Name of Contact Person	l
	American Insurar	ice Products Adv	visors & Assoc Inc
		Firm/ Company	
	3440 Hollywood E	Blvd Ste 415	
	<u> </u>	Address	
	Hollywood, FI 330	021	
	<u></u>	City/ State and Zip Code	
a in	ouranaa na@ama	ail com	
<u>a.ır</u>	surance.na@gma	ed for future annual report	natification)
	E-mail address. (to be us	ieu foi future annual report	nonneation
For further information	n concerning this matter, pleas	e call:	
Yerly Palacio	s	at (305	308-2217
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	urtment 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of



American Insurance Products Advisors & Assoc Inc

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

(Document Number of Corporation ((if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amenda	
A. If amending name, enter the new name of the corporation:	•	
NIA	The n	
name must be distinguishable and contain the word "corporation"Corp.," "Inc.," or Co" or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain to	
B. Enter new principal office address, if applicable:	3440 Hollywood Blvd	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Ste 415	
	Hollywood, FL 33021	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3440 Hollywood Blvd	
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ste 415	
	Hollywood, FL 33021	
D. If amending the registered agent and/or registered office add	dress in Florida, enter the name of the	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	dress in Florida, enter the name of the	
	dress in Florida, enter the name of the	
new registered agent and/or the new registered office address Name of New Registered Agent	dress in Florida, enter the name of the	
new registered agent and/or the new registered office address Name of New Registered Agent	dress in Florida, enter the name of the sss: NA street address)	

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>	<u>Addres</u> s
1) Change	D	Joana Silva	4005 NW 114 Ave
X			Ste 19
Remove			Doral, FL 33178
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Domove			

amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)
N/A	4
- / /	
an amendment provides for an evol	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	/ 0
	N/H
· · · · · · · · · · · · · · · · · ·	

AND
FILED

13 OCT -4 PM 1: 07

SECRETARY Office Thank the

10/01/2013

The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) (CHECK ONE) Adoption of Amendment(s) ☐ 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 (voting group) ☐ 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. 10/01/2013 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) Guillermo Palacios Odiaga (Typed or printed name of person signing) **President** (Title of person signing)