## P14000000096

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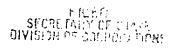
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: SABEN INSURANCE GROUP INC					
DOCUMENT NUMBER: p14000000096					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
ALEJANDRO PICHARDO					
	Name of Contact Person				
ACCOUNTING CENTER OF	ACCOUNTING CENTER OF ORLANDO LLC				
	Firm/ Company				
1150 WEST STATE RD 436					
Address					
ALTAMONTE SPRINGS, FL 32714					
	City/ State and Zip Code				
A DICUA DIO CA CCOLDITINGO DI	LCOM				
APICHARDO@ACCOUNTINGORI	d for future annual report notification)				
E-man address: (to be used	d for future annual report notification)				
For further information concerning this matter, please call:					
ALEJANDRO PICHARDO	at (407 ) 574-5839				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee 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



SABEN INSURANCE GROUP INC (Name of Corporation as currently filed with the Florida Dept. of State) P14000000096 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 5102 OTTERS DEN TRAIL B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) SANFORD, FL 32771 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position, Signature of New 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.

Example: X Change	<u>PT</u>	John Doc		
X Remove	<u>v</u>			
		Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	Address .	
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
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	(Be specific)		
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f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nge, reclassification, or canc Iment if not contained in the	ellation of issued shares, amendment itself:	
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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	•	\$ 1 . co
Effective date <u>if applicable</u> :		DIVISION OF SPECE
· · · · · · · · · · · · · · · · · · ·	(no more than 90 days after amend	
Note: If the date inserted in this document's effective date on the D	plock does not meet the applicable statutory filing partment of State's records.	15 OCT -8 PH 2: Language requirements, this date will not be fisted as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes of ufficient for approval.	cast for the amendment(s)
	proved by the shareholders through voting groups each voting group entitled to vote separately on	
"The number of votes cas	for the amendment(s) was/were sufficient for app	proval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder ac	ction and shareholder
10/01/201 Dated	5	
Signature	Nash Bolina	<del>_</del>
select	difector, president or other officer — if directors of ed, by an incorporator — if in the hands of a receivated fiduciary by that fiduciary)	
	BRIAN SABEN	
	(Typed or printed name of person sig	gning)
	PRES	
	(Title of person signing)	