P14000039100

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	> #)
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(Do	cument Number)	
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,		COVER LETTER	,	1
TO: Amendment Section Division of Corporation			3	3 7
NAME OF CORPOR	ATION: Underwriter	s Support Group	o, Inc.	
DOCUMENT NUMB	P14000039100	· · · · · · · · · · · · · · · · · · ·		PH 3: 33
The enclosed Articles of	of Amendment and fee are sub	mitted for filing.		ORIGINA 33
Please return all corresp	pondence concerning this matt	er to the following:		
	Raymond F. Rodr	iques		
-	- tayınana i i i todi	Name of Contact Person		
	Underwriters Sup			
-	- Traditition oup	Firm/ Company	•	_
•	10761 SW 172 St	• •		
-	 	Address		_
	Miami, FL 33157			
ند		City/ State and Zip Code		_
ravr	mondmtg@gmail.d	com		
		ed for future annual report i	notification)	
For further information	concerning this matter, please	e call:		
Raymond F. I		_{at (} 818	915-9956	
Name o	f Contact Person	Area Cod	le & Daytime Telephone Numb	er
Enclosed is a check for	the following amount made p	ayable to the Florida Depar	rtment 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)	
Ame Divis P.O.	ing Address Indiment Section Ission of Corporations Box 6327 Islansee, FL 32314	Divisio Clifton 2661 E	Address nent Section n of Corporations Building secutive Center Circle ssee, FL 32301	

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently		State)	
P1400039100	y med with the Plorida Dept, or	State,	
· · · · · · · · · · · · · · · · · · ·	of Corporation (if known)		· <u>·</u>
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this <i>Florida Profit C</i>	orporation adopts the follo	wing amendment(s)
A. If amending name, enter the new name of the	e corporation;		
			The new
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or t	orp," "Inc," or "Co". A profess	or "incorporated" or the ional corporation name m	e abbreviation ust contain the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	ble: DDRESS)		
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)		
•			
			프 및 교 유표
D. If amending the registered agent and/or registered agent and/or the new registered	stered office address in Florida, ed office address:	enter the name of the	Dim W
Name of New Registered Agent		· · · · · · · · · · · · · · · · · · ·	
	(Florida street address)	· · · · · · · · · · · · · · · · · · ·	
	(1 to) the street that essy		
New Registered Office Address:	(City)	, Florida(Zip Code	,
	. (City)	(24) 5000	
		•	
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	nt. I am familiar with and accept		on.
Signature of	f New Registered Agent, if changir	אַנ	

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 John Doc -PT X Remove <u>V</u> Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Address Type of Action Title (Check One) S Maurice Shabazz 3878 12th Avenue Change Sacramento, CA 95817 Remove Change Add Remove Change Remove Change Remove Change Add Remove Change Add

Remove

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
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	_	
f an amendment provides for an exch	ange, reclassification, or cancellation of issued s	hares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself	<u>.</u>
· · · · · · · · · · · · · · · · · · ·		
	-	•
· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: 10/08/2014	
(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(by the shareholders was/were sufficient for approval.	s) .
The amendment(s) was/were approved by the shareholders through voting groups. The following statemmust be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	La CO
· (voting group)	55 8 7
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	er and answer
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10/08/2014	333 333
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 cou appointed fiduciary by that fiduciary)	
Raymond F. Rodrigues	
(Typed or printed name of person signing)	
T	
(Title of person signing)	