PIYOOO9640

(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ALL INSURANCE	E CONSULTING INC	
DOCUMENT NUM	BER: P14000096406		<u> </u>
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	М	ARTHA SANCHEZ	
		Name of Contact Person	1
	nach t	Firm/ Company	3 4 7 7 7 4 7 7 7 4 7 7 7 4 7 7 7 4 7
	8018 NW 100 Terrace		
	Tamarac, FL 33321	Address	
	,	City/ State and Zip Cod	e
mari	hasanchez63@hotmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Martha Sanchez		at (786	487-7378
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or 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)
Am Div P.C	illing Address endment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle eassee, FL 32301

Articles of Amendment to Articles of Incorporation of

17 MAY 15 PT 12: 12

ALL INSURACE CONSULTING, INC

A. S.

Name of Corneration as ourse	ntly filed with the Florida Dept. of State)
14000096406	HITY THEO WITH THE PROPERTY OF DEATE
	r of Corporation (if known)
•	•
Fursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	
ALL ADVANTAGE CONSULTANTS, INC	The new
ame must be distinguishable and contain the word "corporal Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the "P.A."
Enter new principal office address, if applicable:	8018 NW 100 Terrace
Principal office address <u>MUST BE A STREET ADDRESS</u>)	Tamarac FL 33321
Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	8018 NW 100 Terrace
	Tamarac FL 33321
If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent	SSS:
(Florida)	street address)
New Registered Office Address:	, Florida
	(City)
•	. /
w Registered Agent's Signoture if changing Desistand Acon	
w Registered Agent's Signature, if changing Registered Agen ereby accept the appointment as registered agent. I am familiar	nt: with and accept the oblige
w Registered Agent's Signature, if changing Registered Agen ereby accept the appointment as registered agent. I am familiar	nt: with and accept the obligi
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nereby accept the appointment as registered agent. I am familiar	with and accept the oblige
nereby accept the appointment as registered agent. I am familiar	with and accept the oblige

Page 1 of 4

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:	, ana sa	ny smart, sv as un Add.	
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>	Name	Address
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove			***
3)Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	AAA.
Add			
Remove			
6) Change	-	N/A	
Add		· · · 	
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
ARTICLE III: Should state: ANY AND ALL LAWFUL BUSINESS
ARTICLE V: the address should be: 8018 NW 100 Terrace Tamarac FL 33321
ARTICLE VI: the address should be: 8018 NW 100 Terrace Tamarac FL 33321
ARTICLE VII: The address should be: 8018 NW 100 Terrace Tamarac FL 33321
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

The date of each amendment(s) adoption:	, if other than the
· ·	
Effective date <u>if applicable</u> : (no more than 90 days after amendment)	file date)
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	r the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the an	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	,,
(voting group)	
■ The amendment(s) was/were adopted by the board of directors without shareholder action was not required.	on and shareholder
□ The amendment(s) was/were adopted by the incorporators without shareholder action as action was not required.	nd shareholder
05/12/2017 Dated	
Signature multiple	
(By a director, president or other officer – if directors or office selected, by an incorporator – if in the hands of a receiver, true appointed fiduciary by that fiduciary)	ers have not been stee, or other court
MARTHA SANCHEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	