## P14000101951

(Re	equestor's Name)	
(Ac	idress)	
(Ác	Idress)	
(Ci	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	PROPERTY LOS	S CONSULTANT GROU	P CORP		
DOCUMENT NUMBER:	P14000101951				
The enclosed Articles of Amend	ment and fee are su	bmitted for filing.			
Please return all correspondence	concerning this mat	ter to the following:			
		DANIEL SILVA			
		Name of Contact Persor	1		
	PROPERTY LOSS CONSULTANT GROUP CORP				
	Firm/ Company				
	2300 W 84TH STREET UNIT 202				
	Address				
	MIAMI FL 33	3016			
		City/ State and Zip Code	2		
	DSILVATLG@	PHOTMAIL.COM			
E-ma	il address: (to be us	ed for future annual report	notification)		
For further information concerning	ng this matter, pleas	e call:			
DANIEL SILVA		954 at (	822-5028		
Name of Contact	Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check for the follow	wing amount made p	payable to the Florida Depa	rtment of State:		
	3.75 Filing Fee & tificate 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 Addr Amendment Se Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations	Amend Divisio Clifton	Address ment Section n of Corporations Building yeartive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

οf

## PROPERTY LOSS CONSULTING GROUP CORP

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P	214000101951
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the con	rporation:
	-The new
	d "corporation," "company," or "incorporated" or the abbreviation, ""Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	SPECC)
(Principal office address <u>MUST BE A STREET ADD</u>	ORESS)
	<del></del>
	The state of the s
C. Enter new mailing address, if applicable:	t <sup>or</sup>
(Mailing address MAY BE A POST OFFICE BOX	<u>X</u> )
	<del></del>
	<u> </u>
D. If amending the registered agent and/or registered	and office address in Florida, onton the name of the
new registered agent and/or the new registered of	
Name of New Projection of Account	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	•
New Registered Agent's Signature, if changing Regi	istered Agent: I am familiar with and accept the obligations of the position.
Thereby accept the appointment as registered agent.	i um jumutum wun unu uccepi ine oonguttons of me position.
Signa	ature 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 Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	P	DANIEL A SILVA	6011 NW 56TH COURT
Add			CORAL SPRINGS FL 33067
Remove			
2) X Change	<u>v</u>	MIGUEL A MENDIOLA	511 SE 5 AVE APT 1911
Add			FT LAUDERDALE FL 33301
Remove			
3) X Change	S	FAWZI FAROUN	4323 NW 71ST DR
Add			CORAL SPRINGS FL 33065
Remove			
4) Change	-		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	_		
Add	<del></del>		
Remove			

amending or adding additional Author additional sheets, if necessary	). (Be specific)			
	<del> </del>	<del> </del>		
	<del></del>			
			<del> </del>	<del></del>
	<u> </u>			
	. — "			
an amendment provides for an ex	change, reclassification	. or cancellation of is	sued shares.	
provisions for implementing the an	<u>nendment if not contain</u>	ed in the amendmen	itself:	
(if not applicable, indicate N/A)				
	<del></del>			
				_
		-		

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi document's effective date on the Department of State's records.	ll not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
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	
by"	
(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.	
Dated 9 30 11 5 Signature	
(By a director, president or other efficer - 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)	
Tauzi Farown (Typed or printed name of person signing)	
(1 yped of printed name of person signing)	
President	
(Title of person signing)	·