P15000080491

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
<u>_</u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section

Division of Corpo	rations		
NAME OF CORPOR	ATION: NATIONAL INSU	RANCE DIRECT INC	
DOCUMENT NUMB			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	FANNIE DIAMOND		
•		Name of Contact Persor	1
	NATIONAL INSURANCE [DIRECT INC	
•		Firm/ Company	
	550 FAIRWAY DRIVE SUI	TE 110	
		Address	
	DEERFIELD BEACH, FL. 3	3441	
		City/ State and Zip Code	
	lou.bynum@nationalinsuranc	edirect.org	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
fannie diamond		at (de & Daytime Telephone Number
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	•	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address Indment Section Ission of Corporations Box 6327 Ithassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment Articles of Incorporation of

200

NATIONAL INSURANCE DIRECT INC			
(Name of Corporation as curren	itly filed with the Florida D	ept. of State)	
P15000080491			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation	adopts the followi	ng amendment(s)
A. If amending name, enter the new name of the corporation:			
			The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation	d" or the abbreviat i name must conta	ion "Corp"
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			~
			
		·	70 A.
			<u>0</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
			
			O
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office addresses.	ddress in Florida, enter the i	name of the	
			
Name of New Registered Agent	 		_
(Florida :	street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip	Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	<u>nt:</u> er with and accept the oblivat	ions of the position	
Thereby decept me appointment as registered agent. I am jumina	, with and decept the owngon		'
Signature of New	Registered Agent, if changin		
Check if applicable			
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1	1) (e), F.S.		

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>Na</u>	<u>nme</u>	<u>Addres</u> s
1) Change	P,VP	LO	OUIE BYNUM	550 FAIRWAY DR. SUITE 110
X Add				DEERFIELD BEACH, FL 33441
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add		_		
Remove				
6) Change				
Add				
Panyora				
14 1211243442				

amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
-	
	
<u>If an amendment provides for an excl</u>	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)	
	

	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this de Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder act	ion and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
• ——-	(voting group)	
Dated	8-7-20	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other conditted fiduciary by that fiduciary)	
	FANNIE DIAMOND	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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