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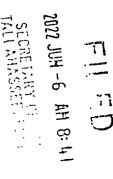
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to F	Filing Officer:	
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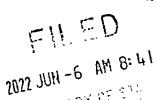


## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ESCUDO INSURA	ANCE CORP	
DOCUMENT NUMBER: P15000087018		. <del></del> .
The enclosed Articles of Amendment and fee are suf-	bmitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
FRANK A VASALLO, ESQ		
<del></del>	Name of Contact Persor	
VASALLO & VASALLO PA	<b>A</b>	
	Firm/ Company	
8796 SW 8TH ST		
	Address	
MIAMI, FL 33174		
	City/ State and Zip Code	······································
FRANK@VASALLOPA.CO	M	
E-mail address: (to be us	ed for future annual report	notification)
For further information concerning this matter, pleas FRANK A VASALLO	e call; at (	224-8900
Name of Contact Person	at ( Area Coo	le & Daytime Telephone Number
Enclosed is a check for the following amount made p		,
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

## Articles of Amendment to Articles of Incorporation of



ESCUDO INSURANCE CORP

ESCUDO INSURANCE CORP	Crass Crass II.
(Name of Corporation	n as currently filed with the Florida Bene of State
P15000087018	TALLAM
	- N. of Constitution (Change)
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida 5 its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the cor	poration:
3. Handida hand, they the whathe of the tol	<u> </u>
· · · · · · · · · · · · · · · · · · ·	The new
	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word iation "P.A."
B. Enter new principal office address, if applicable:	
Principal office address MUST BE A STREET ADDR	(ESS)
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX	·)
	<del></del>
). If amending the registered agent and/or registered	
new registered agent and/or the new registered of	dice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist	tered Agent:
	am familiar with and accept the obligations of the position.
Vianato	ure of New Registered Agent, if changing
ngnaa	are by the a the grant of the artist and the artist
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (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	
$\underline{X}$ Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PST	YOBANY GARCIA	8040 NW 95 St Suite 336
Add			Hialeah Gardens, FL 33016
Remove			
2) Change	VP	HOSVANY ARMAS	941 E 37 ST
Add			HIALEAH, FL 33013
X   Remove   3   Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change		<u></u>	
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

<u>If amending or adding additional A</u> Attach <i>additional sheets, if necessary)</i>	). (Be specific)
· · · · · · · · · · · · · · · · · · ·	<del></del>
f an amendment provides for an ex-	change, reclassification, or cancellation of issued shares,
provisions for implementing the an (if not applicable, indicate NA)	nendment if not contained in the amendment itself:
(y nor appreciate: minetic (v.))	
——————————————————————————————————————	

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	s) adoption:	, if other than the
date this document was signed.  Effective date if applicable:	MAY 26, 2022	
	(no more than 90 days after amendment file date	2)
	is block does not meet the applicable statutory filing requirement. Department of State's records.	nts, this date 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 sharel	nolder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the an e sufficient for approval.	nendment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	·	
,	(voting group)	
MAY 2 Dated	6, 2022	
Signature		
sele	a director, president or other officer – if directors or officers have cted by an incorporator – if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary)	
	YOBANY GARCIA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	