## P16000030392

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, , , ,
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## **COVER LETTER**

**TO:** Amendment Section - Division of Corporations

NAME OF CORPORATION:	FAMILY INS	URANCE CORP.	
DOCUMENT NUMBER: P16	000030392		
The enclosed Articles of Amend	ment and fee are su	bmitted for tiling.	
Please return all correspondence	concerning this ma	tter to the following:	
	Michael S		
		Name of Contact Person	n
	FAMILY I	NSURANCE CORP	
<del></del>		Firm/ Company	
	235 East_	Commercial Blvd Suite	204
		Address	
	Lauderda	le by the sea FI, 33308	
		City/ State and Zip Cod	e
	Mich <u>ael@</u>	leadfoundations.com	
E-ma	il address: (to be u	sed for future annual report	notification)
For further information concernia	ng this matter, plea	se call:	
Michael Sprague		at ( 570	) _768-9112
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for the follow	wing amount made	payable to the Florida Depa	artment of State;
_	3.75 Filing Fee & nificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addr	<u>ess</u>	Street	Address
Amendment Se	ection		lment Section
Distains of Co-continue		Diaminia	on all Communications

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment**

to

Articles of	Incorporation
	of

	C (OCD)	MY INSULANCE	+0	
	ida Dept. of State)	f Corporation as currently filed with the Flori	( <u>Name o</u>	
			P16000030392	
	vn)	(Document Number of Corporation (if know		
endment(s) t	ration adopts the following ame	006, Florida Statutes, this <i>Florida Profit Corpor</i>	Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	
		me of the corporation:	A. If amending name, enter the new na	
new'	The			
iation un the	"incorporated" or the abbrevi   corporation name must contai	ain the word "corporation," "company," or " ution "Corp," "Inc," or "Co". A professional ion," or the abbreviation "P.A."	name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associat	
**	<u>.                                    </u>		B. Enter new principal office address, i	
	7.0	CREET ADDRESS )	Principal office address <u>MUST BE A ST</u>	
	<u> </u>			
_	200 to 1	able:	C. Enter new mailing address, if applie	
[1]			(Mailing address MAY BE A POST C	
)—— 1	<u> </u>			
<b>-</b>	- in			
	the name of the	Vor registered office address in Florida, enter registered office address:	). If amending the registered agent and new registered agent and/or the new	
		MICHAEL SPRAGUE	Name of New Registered Agent	
		235 E COMMERCIAL BLVD #204		
		(Florida street address)		
	Florida 33308	LAUDERDALE BY THE SEA	New Registered Office Address:	
<del></del>	(Zip Code)	(City)		
	oligations of the position.	anging Registered Agent: red agent. I am Jamiliar with and accept the ob	New Registered Agent's Signature, if che hereby accept the appointment as registed	
		MICHAEL SPRAGUE  235 E COMMERCIAL BLVD #204  (Florida street address)  LAUDERDALE BY THE SEA  (City)  anging Registered Agent:	Name of New Registered Agent  New Registered Office Address:  New Registered Agent's Signature, if ch	

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.

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>Name</u>	<u>Addres</u> s
1) Change	P	KEVIN BASS	235 E COMMERCIAL BLVD
Add			LAUD. BY THE SEA
* Remove			FL 33308
2) Change	Р	MICHAEL SPRAGUE	235 E COMMERCIAL BLVD
Add			LAUD. BY THE SEA
Remove			FL 33308
3) Change	VP	PATRICK DONADIO	235 E COMMERCIAL BLVD
Add			LAUD. BY THE SEA
Remove			FL 33308
4) Change			
Add			
Remove			
5) Change	-		
Add			
Remove			
6) Change			
Add			
Remove			

•	(Be specific)
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f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
f an amendment proyides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, industrial industr
provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, indicate in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an amendment itself:
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provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	08-06-18	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendmen	i file date)
Note: If the date inserted in this block does not document's effective date on the Department of S		quirements, this date will not be listed as the
Adoption of Amendment(s) (CHF	CK ONE)	
☐ The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for ap		or the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting g		
"The number of votes cast for the amend	ment(s) was/were sufficient for approva	I
by	<u> </u>	
(votir	g group)	
☐ The amendment(s) was/were adopted by the beaction was not required.	oard of directors without shareholder ac	tion and shareholder
The amendment(s) was/were adopted by the in action was not required.	corporators without shareholder action	and shareholder
Dated08-06-2018		
Signature(By a director_presid	ent or other officer - if directors or officer	ers have not been
	porator – if in the hands of a receiver, tr	
appointed fiduciary t		
	Michael Sprague	
Т)	yped or printed name of person signing)	)
	President	
	(Title of person signing)	