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2021 MAR 12 AM 7: 57 SECRETARY OF STATE

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## COVER LETTER .

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TO: Amendment Section Division of Corporations

2021 HAR 12 AH 7: 57

NAME OF CORPO	RATION: ESMERALDA IN	SURANCE CORP	SECRETARY OF SY TALLAHASSEE, I
DOCUMENT NUM	BER: P16000093894		10 (a, b., 10 ) U (, a, 5 )
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	SADIR CRISTIA		
		Name of Contact Person	1
	ESMERALDA INSURANC	E CORP	
		Firm/ Company	<del>-</del>
	80 SW 8TH ST SUFFE 2000		
		Address	
	MTAMT, FL 33130		
		City/ State and Zip Code	•
	ESMERALDAINSURNCE@	GMAIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, plea	se call:	
SADIR CRISTIA		786 at (	547-0987
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

## Articles of Amendment to Articles of Incorporation

FILED

ESMERALDA INSURANCE CORP

2021 MAR 12 AH 7: 58

ESMERGEDA MODRANCE CORI				202111	AU IZ	1865 / F
(Name of Corporation as	currently	filed with the	Florida Dept. o	f State)		
P16000093894				<u> </u>	E IARY I Alia	COFST SSEF
(Document N	lumber of (	Corporation (if	known)	1/56	rst: ic	<u>, איזר ר.</u>
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	ites, this <i>Fl</i>	lorida Profit C	orporation adop	ts the followin	g amendi	ment(s) to
A. If amending name, enter the new name of the corpora	ntion;					
						ew
name must be distinguishable and contain the word "corpora "Inc.," or Co.," or the designation "Corp," "Inc," or " "chartered," "professional association," or the abbreviatio	"Co". A	mpany," or "ir professional c	ncorporated" or orporation nam	the abbreviatio e must contaii	n "Corp. n the wo	o.," ord
B. Enter new principal office address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS	<u>s</u> )					_
			·-			_
						_
C. Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX)						
						_
						_
						_
D. If amending the registered agent and/or registered of	Baa addus	es in Mandala	4 4	-£4b-		
new registered agent and/or the new registered office		ss in riorida, i	enter the name	<u>or the</u>		
Name of New Registered Agent					-	
					_	
(F	lorida stree	t address)				
New Registered Office Address:			, F	lorida		_
	(C	lity)		(Zip C	Code)	
New Registered Agent's Signature, if changing Registere		L J	L. Lination	C.1		
I hereby accept the appointment as registered agent. I am f	amutar wit	п апа ассері і	ne onligations of	ine position.		
•	Sadir	Cristia				
Signature of	of New Reg	istered Agent,	if changing	···-	•	
Charle if ameliants		•				

☐ 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)

Example:

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; CEO = 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	Y	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	v	CARLA MENDOZA	4721 SW 132ND AVE
X Add			MIAMI, FL 33175
Remove			
2) Change			
Add			
Remove 3) Change		_	
Add			
Remove			
4) Change			
Add			<del> </del>
Remove			
5) Change	_		
Add			
Remove			
6) Change			
Add			
Remove			

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n amendment provides for an excl	hange, reclassification, or cancellation of issued shares,	
ovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
,		

The day of and annual and a	03/08/2021	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
•	3/08/2021	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendm	nent file date)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	idopted by the incorporators, or board of directors wi	ithout shareholder action and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes ca sufficient for approval.	st for the amendment(s)
	pproved by the shareholders through voting groups. or each voting group entitled to vote separately on the	
	st for the amendment(s) was/were sufficient for appr	roval
by	(voting group)	.,,
	(voting group)	
02/08/20	21	
03/08/20 Dated		
Signature	Sadir Cristia	
selec	director, president or other officer - if directors or o ted, by an incorporator - if in the hands of a receiver inted fiduciary by that fiduciary)	officers have not been r, trustee, or other court
	SADIR CRISTIA	
	(Typed or printed name of person signi	ing)
	OWNER	
	(Title of person signing)	