P170200/16625

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates of	f Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ALL FLORIDA A	AUTO INC		
	BER: P17000016625			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	spondence concerning this ma	itter to the following:		
	RICHARD SABOL			
		Name of Contact Perso	n	
	ALL FLORIDA AUTO INS	URANCE INC		
		Firm/ Company		
	1015 ATLANTIC BLVD #1	13		
		Address		
	ATLANTIC BEACH, FL 32	2233		
		City/ State and Zip Cod	e	
ANC	ELICAPANTOJAP@GMAII	COM		
		sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call: at (, 647-0618	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made		·	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate 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 Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address Iment Section on of Corporations Building	
Tall	ahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		

Articles of Amendment Articles of Incorporation

	ot	
ALL FLORIDA AUTO INC		
(Name of Corporation as curre	ntly filed with the Florida Der	ot. of State)
P17000016625		
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation;	is Florida Profit Corporation a	idopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
ALL FLORIDA AUTO INSURANCE INC		. The new
name must be distinguishable and contain the word "corporai "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or word "chartered," "professional association," or the abbreviation B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	"Co". A professional corpor	ration name must contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	FILED
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address	dress in Florida, enter the naress:	me of the

New Registered Office Address:

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

(Florida street address)

(City)

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> 6.1.</u>	<u>John Doe</u>		N/A		
X Remove	V	Mike Jones		1 * 1		
X Add	<u>SV</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	<u>ıme</u>			Address
1) Change			· · · · · · · · · · · · · · · · · · ·			
Add						
Remove						
2) Change		_				
Add						
Remove						
3) Change						
Add						
Remove						
4) Change						
Add						-
Remove						
5) Change						
Add					 	
Remove						
6) Change		_				
Add						
Remove						

(Attach <i>add</i>	g or adding additjonal Arti itional sheets, if necessary).	(Be specific)			
		· · · · · · · · · · · · · · · · · · ·			
			- 8		
			71		· · · · · · · · ·
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					-
provisions	Iment provides for an exch for implementing the amer applicable, indicate NZ()	ange, reclassification idment if not conta	on, or cancellation lined in the amend	of issued shares. ment itself:	
,			· · · · · · · · · · · · · · · · · · ·		
	·		-4-		
		· , ,			

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable:	
Effective date <u>if applicable</u> : (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 da document's effective date on the Department of State's records.	te will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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 stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	rnt
"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 shareholde action was not required.	r
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 2.1-2018	
Dated_2.1-2018 Signature_Richard	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other counappointed fiduciary by that fiduciary)	· · · · · · · · · · · · · · · · · · ·
RICHARD J SABOL	
(Typed or printed name of person signing)	
MANAGER	
(Title of person signing)	

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