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COVER LETTER

TO: Amendment Section

Division of Corpo	orations			
NAME OF CORPOR	RATION: RAUL D	ESPIAN AGE	ENCY INC	
DOCUMENT NUME	BER: <u>770</u>	000 553 4:	2,	
	of Amendment and fee are su			
Please return all corre	Please return all correspondence concerning this matter to the following:			
	ANTONIO	K PROSP	ECT	
		Name of Contact Person		
	6625 WIN	Firm/ Company FIELD BLVD		
	MARGATE	Firm/ Company FIELD BLVD Address FL 33 City/ State and Zip Code	063	
	1	City/ State and Zip Code		
	PROSPECTAH	(POGMAIL.C	ом <u> </u>	
	E-mail address: (to be us	ed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
ANTONIO K	PROSPECT	at (<u>954</u>) 854 2009 le & Daytime Telephone Number	
Name	of Contact Person	Area Cox	le & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
		LaHaha	ssee, FL 32303	

Articles of Amendment to

Articles of Incorporation

KAUL DESPIAN			
(Name of Corporatio	n as currently filed with the Florid	a Dept. of State)	
$\mathcal{P}_{\mathcal{P}}$	7 0000 553 42	-	
(Docum	ent Number of Corporation (if know	n)	•
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpore	ation adopts the following am	nendment(s) to
A. If amending name, enter the new name of the co			
RAULDESPIAN INSURANCE	E & FINANCIAL SEA	RVICES INC The	e new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc." "chartered," "professional association," or the abbrev	rporation," "company," or "incorpo" or "Co". A professional corpore	rated" or the abbreviation "C	Corp., "
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>	eress) N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	x, N/A		7610 11.Y
D. If amending the registered agent and/or register new registered agent and/or the new registered of	office address:		
Name of New Registered Agent	N/A	·	 -
			ទី០
	(Florida street address)		J
March print and CMC or Adams a		Vlorida	
New Registered Office Address:	tCity)	, Florida(Zıp Code.	,
New Registered Agent's Signature, if changing Registered agent.		livations of the position.	
The conjunction of the second	NIA	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Signa	tture of New Registered Agent, if cha	nging	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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 = ChiefExecutive 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: XChange	<u>PT</u>	John Doe	t
X Remove	<u>v</u>	Mike Jones	N/A
X Add	<u>\$V</u>	Sally Smith	/
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		 -	
Add			
Remove			
2) Change			
Add			
Remove 3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
51 Change		_	
Add			
Remove			
6) Change		_	
Add			
Remove			

amending or adding additional Articles, enter cl much additional sheets, if necessary)—(Be specific	hange(s) here:
· · · · · · · · · · · · · · · · · · ·	
an amendment provides for an exchange, reclas- provisions for implementing the amendment if no	<u>sification, or cancellation of issued shares,</u> of contained in the amendment itself:
(if not applicable, indicate N/A)	N/A
	70 / / /

•

The date of each amendment(s) ac	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file do	te)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirempartment of State's records.	ents, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shar	cholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the efficient for approval.	amendment(s)
• •	roved by the shareholders through voting groups. The folloeach voting group entitled to vote separately on the amenda	-
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	tvoting group)	
Dated	8-7-2020	
Signature		
selected	rector, president or other officer – if directors or officers ha l, by an incorporator – if in the hands of a receiver, trustee, and tiduciary by that fiduciary)	
	RAUL DESPIAN (Typed or printed name of person signing)	
	INCORPORATOR/ PRESIDEN (Title of person signing)	T
	(Title of person signing)	