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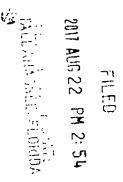
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C. GOLDEN AUG 2 4 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Royal Insurance	: Of Florida, Corp	
DOCUMENT NUM	1BER: P17000056319		
The enclosed Article	es of Amendment and fee are	submitted for filing.	
	espondence concerning this r		
	Barbara J Gonzalez		
		Name of Contact Pers	Son
	Royal Insurance of Florida,	Corp.	
	7250 W 24th Ave Ste4	Firm/ Company	
	Hialcah,Florida 33016	Address	
		City/ State and Zip Cod	de
royal	insurancecorp@gmail.com		
	E-mail address: (to be u	ised for future annual repor	t notification)
For further information	n concerning this matter, plea	se call:	
Barbara'J Gonzalez		at (834-8262
Name (of Contact Person)
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. I	ing Address adment Section ion of Corporations Box 6327 assee, FL 32314	Amendi Division Clifton	Address ment Section n of Corporations Building recutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

Royal Insurance of Florida.Corp. 2017 AUG 22 PM 2: 54 (Name of Corporation as currently filed with the Florida Dept. of State) P17000056319 14:1 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 1). If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent Barbara J Gonzalez 7250 W 24th Ave Ste4 (Florida street address) New Registered Office Address: (City) 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. New Registered Agent, if changing

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 Doc 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 Doc, 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>	Address
1) Change	P	Frank Rodriguez	7250 W 24th Ave Ste4 Hialcah,Fl
Add			
X Remove			
2) Change	<u>р</u>	Barbara J Gonzalez	7250 W 24th Ave Ste4 Hialeah, Fl
X Add			
Remove			
3) Change			-
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add	 		
Remove			

	(Be specific)			
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f an amendment provides for an excl	nange, reclassific	ation, or cancellati	on of issued shares,	
provisions for implementing the ame	nange, reclassific ndment if not co	ation, or cancellati ntained in the ame	on of issued shares, ndment itself:	
If an amendment provides for an exchange provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassific ndment if not co	ation, or cancellati ntained in the ame	on of issued shares, ndment itself:	
provisions for implementing the ame	nange, reclassific ndment if not co	ation, or cancellati ntained in the ame	on of issued shares, ndment itself:	_
provisions for implementing the ame	nange, reclassific ndment if not co	ation, or cancellati	on of issued shares, ndment itself:	_
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provisions for implementing the ame	nange, reclassific	ation, or cancellati	on of issued shares, ndment itself:	

• •	08/21/2017	
The date of each amendment(s)	idoption:	, if other than th
date this document was signed.		
08/ Effective date <u>if applicable:</u>	21/2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this cepartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment afficient for approval.	s(s)
The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following staten each voting group entitled to vote separately on the amendment(s):	dent
"The number of votes case	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and sharehold	ler
action was not required.	opted by the incorporators without shareholder action and shareholder	
08/21/2017 Dated		
Signature_		
	irector, president or other officer - if directors or officers have not been	<u></u>
selecte	d, by an incorporator – if in the hands of a receiver, trustee, or other could fiduciary by that fiduciary)	rt
	Frank Rodriguez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	