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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Palm Valley Insura	ince. Inc.	
DOCUMENT NUMI	P17000062624		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Leslie Hilton		
		Name of Contact Persor	1
		Firm/ Company	
	110 Cumberland Park Dr. #1	06	
		Address	
	Saint Augustine, FL 32095	<u>.</u>	
		City/ State and Zip Code	e
ronhi	lton@palmvalleyinsure.com		
 	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Ronald Hilton		904 at (595-6500
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or 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)
Am Div P.C	iling Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Ameno Divisio Clifton 2661 F	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

Palm Valley Insurance, Inc.				
(Name o	of Corporation as current	v filed with the Florida Dep	ot. of State)	
P17000062624				
	(Document Number o	f Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation 3	dopts the folk	owing amendment(s)
A. If amending name, enter the new na	ame of the corporation:			
-				The new
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp." "Inc." or "	"Co". A professional corpor	orated" or ti cation name n	he abbreviation must contain the
		110 Cumberland Park Dr. #106		
B. Enter new principal office address, (Principal office address MUST BE A S	TREET ADDRESS)	Saint Augustine, FL 32095		
		 		
C. Enter new mailing address, if appli	icable:	110 Cumberland Park Dr.	. #106	
(Mailing address MAY BE A POST)	<u>OFFICE BOX</u>)			
		Saint Augustine, FL 32095		
			E 41	_
D. If amending the registered agent an new registered agent and/or the new	id/or registered office add w registered office addres:	ress in Florida, enter the na	me or the	
	Leslie Hilton	_		
Name of New Registered Agent	110 Cumberland Park Dr.	*106		
		reet address)		
	Saint Augustine	evi daaressy	320	195
New Registered Office Address:	Samt Augustine	(City)	Florida	(Zip Code)
		17 11,17		,
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent	: with and accept the abligation	ns at Gosia	第 刊
1 петелу ассері іне арроінітені as regisi	етей ахет. Тат јатиа	nun and accept the omiguno	ETARY.	一一
	Signature of Vove	Registered Agent, if changing	- m	
	inghalure of New 1	regimereu zigem, ij enunging		139

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>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	CEO	Ronald H	lilton	110 Cumberland Park Dr. #106
X Add	-	<u> </u>		Saint Augustine, FL 32095
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change			 	
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or add (Attach additional sh	iects, if necessary).	(Be specific)				
		.			-	<u> </u>
		<u> </u>				_
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F. If an amendment p	provides fo <u>r an exc</u>	hange, reclassifi	cation, or cance	ellation of issued	l shares,	
provisions for imp	plementing the ame	endment if not co	ontained in the	amendment itse	<u>:If:</u>	
	ble, indicate N/A)					
10000000 shares of the	e company are equa	lly divided in 50%	% portions each 	to Leslie Hilton	President and Ro	onald Hilton CEC
<u> </u>						
	-			· ·	_	
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		-			<u>-</u>	
						<u> </u>
	<u> </u>					

	08/01/2019
The date of each amendment(s) a date this document was signed.	doption:, if other than
-	01/2019
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date will not be listed as epartment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
☐ The amendment(s) was/were apmust be separately provided for	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder
action was not required.	
·	,
08/01/201 Dated Signature	Uslie R Hector
(Ву а	director, president or other officer – if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court
арроі	nted fiduciary by that fiduciary)
	Leslie Hilton
	(Typed or printed name of person signing)
	Presidnet
	(Title of person signing)

the

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