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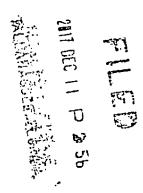
(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Assured Auto Grou	up. Inc.	
DOCUMENT NUM	D17000000130		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Gustav Renny		
		Name of Contact Perso	n
		Firm/ Company	·
	931 Village Blvd, Suite 905-	290	·
		Address	
	West Palm Beach, FL 33409		
		City/ State and Zip Cod	e
gusre	nny@me.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Gustav Renny		305 at (778-7114) de & Daytime Telephone Number
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check to	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.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations a Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

Assured Auto Group, Inc	2012 050 11 50 60 50
(Name of Corporation	on as currently filed with the Florida Dept. of State)
	LA PARTE OF THE PA
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the co	rporation:
	The new large transfer or "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u></u>
	·
D. If amending the registered agent and/or register new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
New Negistered Office Audress.	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi	istered Agent:
	am familiar with and accept the obligations of the position.
Signo	nture of 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 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) X Change	VP		William Finneran	931 Village Blvd, Suite 905-290
Add				West Palm Beach, FL 33409
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change			<u> </u>	
Add				- · · · · · · · · · · · · · · · · · · ·
Remove				
5) Change		_		
Add				
Remove				
6) Change				· · · · · · · · · · · · · · · · · · ·
Add				•
Remove				

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
·-····································	
-	
	
	
If an amendment provides for an exclusions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adopt	ion:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, the ment of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the amendrent for approval.	nent(s)
	ed by the shareholders through voting groups. The following st h voting group entitled to vote separately on the amendment(s)	
"The number of votes cast for t	he amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and share	:holder
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and sharehold	ler
Dated		
	(h. //	
Signature		
(By a direct	or, president or other officer - if directors or officers have not	
	an incorporator – if in the hands of a receiver, trustee, or othe	r court
appointed f	iduciary by that fiduciary)	
Gus	tav Renny	
	(Typed or printed name of person signing)	
Pres	sident	
	(Title of person signing)	