## P17000/000/8

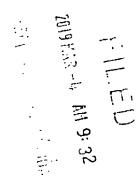
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: KROPP CLAIMS	ADJUSTING INC				
DOCUMENT NUMI	D17000100018		· · · · · · · · · · · · · · · · · · ·			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:				
	MATTHEW KROPP					
		Name of Contact Person	n			
	KROPP CLAIMS ADJUSTI	NG				
	Firm/ Company					
	1817 OAK TRAIL W #105					
		Address	• • • • • • •			
	CLEARWATER, FL 33764					
		City/ State and Zip Cod	c			
KRO	PPCLAIMADJUSTING@YA	AHOO.COM				
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	n concerning this matter, pleas		346-4182			
	of Contact Person		) 346-4182 de & Daytime Telephone Number			
name (	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	r 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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

## Articles of Amendment to Articles of Incorporation of

## KROPP CLAIMS ADJUSTING INC

(Name of Corporation as currently	filed with the Florida Dept. of State)
P17000100018	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:  ROUGH WATER CLAIMS ADJUSTING INC	
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	u addraec)
·	. Florida
New Registered Office Address: (C	City) Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signature of New Res	vistered 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	PT	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	<u>nes</u>		
X Add	<u>sv</u>	Sally Sm	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change		_			
Add					
Remove					
2) Change		_			
Add					
Remove					
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4) Change		_			
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5) Change		_			
Add					
Remove					····
6) Change		_		•	
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Remove					

(Attach addition	o <mark>r adding add</mark> onal sheets, if i	necessary).	(Be specific)				
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If an amenda	nent provides	for an excha	inge, reclassif	<u>fication, or ca</u>	ncellation of is he amendmen	ssued shares,	
(if not a	pplicable, indi	cate N/A)	uniem n not	contained in i	ne amenonien	t itsen.	
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			2010				

The date of each amendmen		, if other than the
date this document was signed	l. - 03/01/2019	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this dathe Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	re adopted by the shareholders. The number of votes cast for the amendment(ere sufficient for approval.	s)
	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	enl
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholde	er
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
02/2 <i>6</i> Dated	5/2019	
Signature	Marken Mor	
(E so	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other courppointed fiduciary by that fiduciary)	
	MATTHEW KROPP	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	