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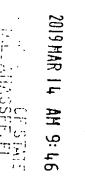
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Family First Insura	ance Agency, Inc	
DOCUMENT NUMBE			. <u></u>
	**************************************	ibmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
K	Lenneth Grushoff		
-		Name of Contact Persor	1
F	amily First Insurance Agen-		
_		Firm/ Company	
1	025 NW 124th Ave	rinii Company	
		Address	
C	1 C	Address	
	Fl. 33071	_	
		City/ State and Zip Code	e
sgrushe	off@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
Karanah Cara Carah G	-	051	620.7855
Kenneth Scott Grushoff		at () 629-7855 de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made p	payable to the Florida Depa	rtment 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)
Ameno Divisio P.O. B	ng Address dment Section on of Corporations fox 6327 assee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2019 HAR 14 AM 9: 46

Family First Insurance Agency, Inc.

(<u>Name</u>	of Corporation as currently	<u>r filed with the Florida D</u>	
P18000019339			AMA AMASSEE.
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this z	Florida Profit Corporation	n adopts the following amendment(s) t
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp," "Inc," or "(Co". A professional corp	orporated" or the abbreviation poration name must contain the
B. Enter new principal office address,			····
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)			
(Maning Maness Mary 1927)	<u>0.117</u> 0.0 00.00		
		<u> </u>	
			
D. If amending the registered agent ar			name of the
new registered agent and/or the new	_		
Name of New Registered Agent	Kenneth Grushoff		
	1025 NW 124th Ave		
	(Florida stre	et address)	
New Registered Office Address:	Coral Springs		Florida
	•	(City)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent:		
I hereby accept the appointment as regist	tered agent. I am familiar w	ith and accept the obligat	ions of the position.
	,	0 //	
\checkmark	,	- ///	
/>	Signature of New Ro	eglegered Agena, if changir	ng
		/// /	

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	$\underline{\text{pT}}$	John De	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	nes	
<u>X</u> Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	P		Kimberle Guice-Grushoff	1025 NW 124th Ave
Add				Coral Springs, FL 33071
X Remove				
2) X Change	P		Kenneth Grushoff	1025 NW 124th Ave
Add				Coral Springs, FL 33071
Remove				
3) Change		_		
Add				·
Remove				
4) Change		_		
Adá				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

famending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
-	
 -	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
	
<u>-</u>	

The date of each amendment(s) adoption: 2/12/2019	if other than
Effective date if applicable: 2/12/2019	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Dated	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Gregg Blanchard	
(Typed or printed name of person signing)	
Vice President	
(Title of person signing)	

the

the