## P180000 95990

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(City/State/Zip/Phone #)
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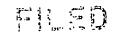
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2022 OCT 20 PM 1: 2

## Articles of Amendment to Articles of Incorporation of



2022 OCT 20 PM 1: 20

## AMERICAN MUTUAL INSURANCE CO.

filed with the Florida Dept. of State  5990  Corporation (if known)  Iorida Profit Corporation adopts the following amendment(s) to			
Iorida Profit Corporation adopts the following amendment(s) to			
The new			
ompany." or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word			
13902 N Dale Mabry Hwy, STE 217			
Tampa, FL 33618			
13902 N Dale Mabry Hwy, STE 217			
Tampa, FL 33618			
ess in Florida, enter the name of the			
et address)			
, Florida City) (Zip Code)			
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ith and accept the obligations of the position.			
gistered Agent, if changing			

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u> John I	<u>Doc</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	TS	AUSTIN ARENAL	16114 ARMISTEAD LN
Add			ODESSA, FL 33556
X Remove 2) Change X Add	TS	Michelle Stephenson	139 <u>02 N Dale Mabry Hwy, STE 2</u> 17 Tampa, FL 33618
Remove 3 ) Change Add	Secretary	AUSTIN ARENAL	16114 ARMISTEAD LN
X Remove  4) Change X Add	Secretary	Michelle Stephenson	ODESSA, FL 33556  13902 N Dale Mabry Hwy, STE 217 Tampa, FL 33618
Remove 5) Change Add			
Remove  Change  Add  Remove			

	adding additional A al sheets, if necessary	). (Be specific)				
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f an amendmer	it provides for an ex	change, reclassif	ication, or cancel	lation of issued :	shares,	
<u>provisions for i</u>	implementing the ar	nendment if not a	ontained in the E	ımendment itsel	<u>f:</u>	
(if not appli	icable, indicate N/A)					
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The date of each amendment(s) adoption: 10/04/2022	, if other than the
date this document was signed.	_, ,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Effective date if applicable:	
(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 will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and s action was not required.	hareholder
☐ 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 cast for the amendment(s) was/were sufficient for approval	20
by	022 OCT 20
(voting group)	C
Dated $10/4/2622$	
Signature Wilchell All	PM 1: 20
(By a director, president or other officer - if directors or officers have not been	~ 'ŏ
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
Director /Owner	
(Title of person signing)	<del>-</del>