P19000035326

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2021 JAH 19 PH 5: 16 SEGRETARY OF STATE

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COVER LETTER

Division of Corpor	•	· ·				
NAME OF CORPORA	ATION: EDURANGO INS	URANCE CORP				
DOCUMENT NUMBE	ER: P19000035326					
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all corresp	ondence concerning this ma	tter to the following:				
E	LSIMAR DURANGO					
 	Name of Contact Person EDURANGO INSURANCE CORP					
8	Firm/ Company 8615 COMMODITY CIR					
_	Address					
C	PRLANDO, FL 32819					
_		City/ State and Zip Cod	c			
e	durangoinsurance@gmail.co	om				
_	E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, pleas	se call:				
ELSIMAR DURANGO		at (³²¹	9450175			
Name of	Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:			
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 assee, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment to Articles of Incorporation of

FILED

EDURANGO INSURANCE CORP 2021 JAN 19 PH 5: 16 (Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE P19000035326 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.." "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 2630 Avian loop B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Kissimmee 34741 C. Enter new mailing address, if applicable: 2630 Avian loop (Mailing address MAY BE A POST OFFICE BOX) Kissimmee 34741 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: . Florida New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered 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 Doe X Remove <u>V</u> Mike Jones \underline{X} Add SV Sally Smith Type of Action <u>Title</u> <u>N</u>ame Address (Check One) **ELSIMAR DURANGO** 2630 Avian loop 1) ____ Change Kissimmee 34741 Add Remove HENRY JOSUE PEREZ GARCIA 2630 Avian Ioon 2) ____ Change Kissimmee 34741 ___ Add 2630 Avian loop __ Remove VΡ **ELSIMAR DURANGO** Kissimmee 34741 3) ____ Change Add ____ Remove 4) ____ Change ___ Add ____ Remove) ____ Change ___ Add __ Remove __ Change __ Add __ Remove

attach additional sheets, if necessary).	(Be specific)
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an amendment provides for an exchorovisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
····	

• •	09-15-2020		
The date of each amendment(s)	adoption:	 ,	, if other than the
date this document was signed.			
09. Effective date <u>if applicable</u> :	15-2020		
Effective date it appreade.	(no more than 90 days a	ifter amendment file date)	
Note: If the date inserted in this document's effective date on the L		atutory filing requirements, this date will no	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were action was not required.	lopted by the incorporators, or board of	f directors without shareholder action and shareholder	areholder
☐ The amendment(s) was/were ac by the shareholders was/were:	dopted by the shareholders. The numbe sufficient for approval.	er of votes cast for the amendment(s)	
	proved by the shareholders through volr each voting group entitled to vote sep		
"The number of votes cas	t for the amendment(s) was/were suffic	tient for approval	
by 100		»	
· · · · · · · · · · · · · · · · · · ·	(voting group)	,	
12-22-202 Dated	0		
	510		
Signature Esim	ar Murango (Jan.6, 2021 09-26 EST)		
(By a	director, president or other officer - if d		
	ed, by an incorporator – if in the hands	of a receiver, trustee, or other court	
appoi	nted fiduciary by that fiduciary)		
	Elsimar Durango		
	(Typed or printed name of	person signing)	
	Presidente		
	(Title of person signing)		