Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230002361543)))



H230002361543ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019

Phone : (305)552-5973 Fax Number : (305)675-5944

**Enter the email address for this business entity to be used for future, annual report mailings. Enter only one email address please. **

Email	Address:
--------------	----------

023 JUL -5 Fii 12: 1

COR AMND/RESTATE/CORRECT OR O/D RESIGN CENTAURO INSURANCE GROUP INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

55 JH 4:25

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment

Articles of Incorporation			
CENTAURO INSURANCE GROU	P	Tul:	7
Florida Document Number: <u>P19000055820</u>	-		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Cofollowing amendment(s) to its Articles of Incorporation:	rpor	ation add	ppts the
REMOVER: CETAS BREGORIO A			
ADD: F AND KA		·	
CARLOS MANUEL QUESADA			<u> </u>
6780 GRAL WAY #2		20	
MIAMI FL 33155	:	ال ال	
		7	190
		21119	
			
These articles of amendment were adopted on			
The corporation has only one group of voting stock. This amendment was approved by the share of	holder	s and the	number of
The Later of the Control of the Cont			
Signalure			
Printed Name and Title (UESADA)			
lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with an accept the obligations of the p	osition.		