P19000093778

(Re	equestor's Name)	
(Ad	idress)	
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☐ PICK-UP	☐ WAIT	MAIL
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A. RAMSEY DEC 16 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Property Insurance	Claims, Inc.		
DOCUMENT NUMB	ER: <u>P19000093778</u>			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corresp	pondence concerning this ma	tter to the following:		
	Scott Dinin			
		Name of Contact Person		
-	•	Firm/ Company		
_	4200 NW 7th Ave 5	wite P		
		Address		
-	Miami, FL 33127	0: (0: 17: 0: 1		
		City/ State and Zip Code)	
-	sdinin@outlook.com E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
Scott Dinin		at (_305) 7615088	
Name o	f Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:	
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ssee, FL 32303	

Articles of Amendment to Articles of Incorporation of

FILED

PROPERTY INSURANCE CLAIMS INC.

Check if applicable

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

2021 NOV 29 AM II: 10

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(Name of Corporation	on as currently file	d with the Florida l	Dept. of State) STATE
P19000093778		* 77	्रम्थे विद्यार हो गुरुष्टे (
(Docun	nent Number of Cor	poration (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <i>Flori</i>	da Profit Corporatio	n adopts the following amendment(s
A. If amending name, enter the new name of the co	orporation:		
PropertyRite Co			The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc.," "chartered," "professional association," or the abbre	" or "Co". A pro	any," or "incorporation of essional corporation of ess	red" or the abbreviation "Corp.," on name must contain the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD			
	_		
	_	<u>.</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)X</u>)		
			
D. If amending the registered agent and/or register new registered agent and/or the new registered		n Florida, enter the	name of the
Name of New Registered Agent			<u></u>
	(Florida street ac	ldress)	
New Registered Office Address:			, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	rictored Agent:		
I hereby accept the appointment as registered agent.	I am familiar with a	and accept the obliga	itions of the position.
Sion	ature of New Revist	ered Agent, if chang	ing
<i>.,,</i> g,			<u> </u>

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.

X Change	<u>PT</u>	John Doe						
X Remove	<u>V</u>	Mike Jone	<u>es</u>					
X Add	<u>sv</u>	Sally Smi	<u>th</u>					
Type of Action (Check One)	<u>Title</u>	1	<u>Name</u>			<u>Addres</u> s		
1) Change								
Add							 	
Remove								
2) Change								
Add								<u>-</u>
Remove Change					<u></u>			
Add								
Remove							 _	
4) Change							 	_
Add								
Remove								
5) Change							 	
Add							 	
Remove							 	
6) Change								
Add								
Remove								

наси ааанол	adding additional Art ul sheets, if necessary).	(Be specific)				
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an amendme	nt provides for an exc	hange, reclassific	ation, or cancel	lation of issued	shares,	
provisions for	implementing the amelicable, indicate N/A)	endment if not co	intained in the a	imendment itse	<u>:II:</u>	
(ij noi app	icable, maicale (v/A)					
						
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The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, t Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amend sufficient for approval.	iment(s)
☐ The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. The following sor each voting group entitled to vote separately on the amendment(s,	statement):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
/ ½ /09/202 Dated		
Signature	10 D	
(By a	director president or other officer – if directors or officers have not ted, by an incorporator – if in the hands of a receiver, trustee, or othe inted fiduciary by that fiduciary)	
	Scott Dinin	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	