## P2000033890

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(Cit	ty/State/Zip/Phone	e #)
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Daniel Lempesis In	ns Agency, Inc.	<u></u>
DOCUMENT NUM	BER: P20000033890		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Jeffrey Hill		
		Name of Contact Person	n
	ABS of Jacksonville Inc		
		Firm/ Company	
	6554 103rd Street		
		Address	
	Jacksonville, FL 32210		
		City/ State and Zip Cod	e
	absparalegal@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, plea	se call: at (	. 777-1533
	of Contact Person	at ( Area Co	) de & Daytime Telephone Number
	or the following amount made		
■ \$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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, 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

Daniel Lempesis Ins Agency, Inc.

(Name of Corporation as curren	itly filed with the Florida D	ept. of State)	
P20000033890			
(Document Number	of Corporation (if known)		_
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation	a adopts the following amendment(s)	) to
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation	The new addreviation "Corp.," a name must contain the word	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<del></del>		
		2020 H)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
		20 HAY 11 PH 12:	- - - - - - -
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address		name of the	
(Florida :	street address)		
New Registered Office Address:	(City)	, Florida(Zip Code)	
	(Cily)	my coar,	
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familia.		ions of the position.	
Signature of New	Registered Agent, if changin	<u> </u>	
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)			

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Stephanie Lempesis	97302 Harbor Concourse Cir
X Add			Fernandina Bch, FL 32034
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			<del></del>
Remove			
5) Change		_	
Add			<del></del>
Remove			
6) Change		_	
Add			
Remove			

	if necessary).	cles, enter chang (Be specific)			
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le		ange, reclassific	ation, or cancella	tion of issued snar	<u>'S.</u>
f an amendment provid provisions for impleme	nting the amer	ndment if not co	ntained in the an	<u>iendment itself:</u>	
If an amendment provid provisions for impleme (if not applicable, in	nting the amer	ndment if not co	ontained in the am	iendment itself:	
provisions for impleme	nting the amer	ndment if not co	entained in the am	iendment itself:	
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provisions for impleme	nting the amer	ndment if not co	entained in the am	endment itself:	

The date of each amendment(s) ad	May 7, 2020	, if other than the
date this document was signed.	option	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file dat	2)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirement partment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the ar ficient for approval.	nendment(s)
	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendment	
"The number of votes cast:	for the amendment(s) was/were sufficient for approval	
by	<u>,"</u>	
•	(voting group)	
May 7, 2020 Dated		
Signature	Varid Runger	
selected	ector, president or other officer – if directors or officers have, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	
	Daniel Lempesis	
	(Typed or printed name of person signing)	
	President	
•	(Title of person signing)	