P20 0000 40925

(Danisahada Masa)
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COVER LETTER

rO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Universal Claims a	Adjusters Inc			
DOCUMENT NUM	1BER: P20000040925				
	es of Amendment and fee are su	ibmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	Patrick W Pooley				
		Name of Contact Person	1		
	Universal Claims Adjusters Inc				
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·		
	5448 Hoffner Ave #408				
	Address				
	Orlando FL 32812				
		City/ State and Zip Code	e		
	patrickpooley@yahoo.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informat	ion concerning this matter, plea	so call:			
roi iuralei informat	ion concerning this matter, piea	se can.			
Patrick W Pooley		407 at (7821425		
Name of Contact Person Area Code & Daytime Telephone No			de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Universal Claims Adjusters Inc

(Name	of Corporation as current	ly filed with the Florida Dept. of State)		
	P 200000	40925		
		of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes, this	. Florida Profit Corporation adopts the fo	llowing amendment(s) to	
A. If amending name, enter the new n	name of the corporation:			
			The new	
	Corp, " "Inc," or "Co".	'company," or "incorporated" or the abbi A professional corporation name must "		
B. Enter new principal office address,	, if applicable:	5448 Hoffner Ave Suite # 408		
(Principal office address <u>MUST BE A S</u>		Orlando FL32812		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		11.	6783	
				
D. If amending the registered agent a				
new registered agent and/or the ne		<u>s:</u>	ب ب	
Name of New Registered Agent	Patrick W Pooley			
	5448 Hoffner Ave. Suite t	#408 		
	·	reet address)		
New Registered Office Address:	Orlando	, Florida,	2812	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c	changing Registered Agen	t:		
I hereby accept the appointment as regis	tered agent. – Lam familiar	with and accept the obligations of the pos	cition.	
		0		
•	++ 1	Un 1		
	Signature of New I	Registered Agent, if changing		
Check if applicable				
☐ The amendment(s) is are being filed p	oursuant 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)

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 Doc	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) XX Change	Р	Patrick W Pooley	5448 Hoffner Ave Suite #408
Add			Orlando FL 32812
Remove			
2) XX Change	VP	Daveiba Padilla Jimenez	5448 Hoffner Ave Suite #408
Add			Orlando FL 32812
Remove Change			
Add			
Remove			
4) Change			
Add			····
Remove			
5) Change			
Add			4
Remove			
6) Change			
Add			
Remove			

LA	amending or adding additional Articles, entacts additional sheets, if necessary).—(Be sp	recific)	_		
Chan	ging Register Agent and menbers address				
			<u>,</u>		
					 .
			, , ,		
					
	.	_			_
f. 1f	an amendment provides for an exchange, re	eclassification, or	cancellation of is	sued shares.	
Đ	rovisions for implementing the amendment (if not applicable, indicate N/A)	if not contained	in the amendmen	t itself:	
	(i) ma appricable, marcare (v.1)				
			· · · · · · · · · · · · · · · · · · ·		
_ · 					

The date of each amendment(s	July 20, 2020 Stadontion:	, if other than th
date this document was signed.		 -
Effective date <u>if applicable</u> : _		,
	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this date to Department of State's records.	will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was were action was not required.	adopted by the incorporators, or board of directors without shareholder action a	and shareholder
☐ The amendment(s) was were by the shareholders was wer	adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated0^-	7/20/2020	
Signature	1 trues	
selv	a director, president or other officer – i directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court sointed tiduciary by that tiduciary)	
	Patrick W Pooley	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	