P20000093937

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2022 APR 20 AM 7: 24 SECRETARY OF STATE

A. BUTLER
JUN - 7 2022

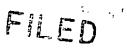
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Phoenix Assurance	e Florida Inc.	
	1BER: P20000093937		
	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	itter to the following:	
	Jane Tewell		
		Name of Contact Person	1
	Phoenix Assurance Florida Ir	ıc.	
		Firm/ Company	<u></u>
	8980 Water Tupelo Road	, ,	
	Address		
	Fort Myers, FL 33912		
		City/ State and Zip Code	2
	lace1837@hotmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
Jane Tewell		at (<u>734</u>	9343625
Namo	e of Contact Person	Area Co	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)
Ar Di P.	ailing Address mendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio The C	Address Iment Section In of Corporations In the Corporations In the Corporations In the Corporations In the Corporation of Tallahassee

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



Phoenix Assurance Florida Inc.				
		Les de de Marida D	2022 App. 20 AM 7: 24	
	Corporation as current	y filed with the Florida De		,
P20000093937	. <u> </u>	ı	SECRETARY OF STATE	
	(Document Number o	f Corporation (if known)	MLLAHASSEE, FILE	
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation	adopts the following amends	ment(s
A. If amending name, enter the new name	me of the corporation:			
Not Applicable			The n	ew.
name must be distinguishable and contain t "Inc.," or Co.," or the designation "Co "chartered," "professional association," o	orp," "Inc," or "Co". z	A professional corporation	l" or the abbreviation "Corp	· "
Enter new principal office address if	fannliaghlar	Not Applicable		
B. Enter new principal office address, if Principal office address <u>MUST BE A ST</u>				_
				_
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		Not Applicable	-	
D. If amending the registered agent and			ame of the	-
new registered agent and/or the new		<u>·</u>		
Name of New Registered Agent	Not Applicable			
-	(Florida str	eet address)		
No. Business Comments	Not Applicable		Disaids	
New Registered Office Address: '	. •	(City)	, Florida	-
		•	·	
New Registered Agent's Signature, if checkers hereby accept the appointment as register	anging Registered Agent red agent. I am familiar s	: with and accept the obligation	ons of the position.	
	Signature of New R	egistered Agent, if changing	·	

Check if applicable

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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.

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	S	Leah Tewell	8980 Water Tupelo Road
x Add			Fort Myers, FL 33912
Remove			
2) Change		<u> </u>	
Add			
Remove 3) Change	_		
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articl (Attach additional sheets, if necessary).	les, enter change(s) here: (Be specific)
	(or specific)
Not applicable	
_	
	
 	
F. If an amendment provides for an exchai	nge, reclassification, or cancellation of issued shares,
provisions for implementing the amend (if not applicable, indicate N/A)	dment if not contained in the amendment itself:
•	
Not Applicable	
	

•

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The date of each amendment(s)	04-18-22	if other than the
date this document was signed.	adoption.	, if other than the
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 I	block does not meet the applicable statutory filing requirements. Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were acaction was not required.	lopted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amend sufficient for approval.	Iment(s)
	oproved by the shareholders through voting groups. The following are each voting group entitled to vote separately on the amendment(s	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
04-18-22 Dated		
Signature	ne Tewell	
€lect	director, president or other officer – if directors or officers have not ed, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	been er court
	Jane Tewell	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	