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SECRETARY OF STATE
TATE AHARSSEF FIRE

JUL 2 7 2021 A RAMSEY

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Unity First Insuran	nce Group, Inc.				
DOCUMENT NUN	IBER: P21000044403					
The enclosed Article	s of Amendment and fee are si	ibmitted for filling.				
Please return all corr	espondence concerning this ma	nter to the following:				
	Wiskenze Dulcio					
		Name of Contact Perso	n			
	Unity First Insurance Group, Inc.					
		Firm/ Company				
	1315 Oakfield Dr.					
•	<del></del>	Address				
	Brandon, FL 33509					
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	City/ State and Zip Cod	c			
	keng unityfirstins.com					
	•	sed for future annual report	notification)			
Wiskenze Duleio	on concerning this matter, plea	se call:	982-7775			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
inclosed is a check f	or the following amount made					
S35 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)			
Mailing Address			Address			
	iendment Section ision of Corporations	Amendment Section				
	). Box 6327	Division of Corporations The Centre of Tallahassee				
	lahassee, FL 32314		N. Monroe Street, Suite 810			
		Fallaha	issee, FL 32303			

FILED

2021 JUL - 1 AM 10: 30

## Articles of Amendment to Articles of Incorporation υf

	ly filed with the Florida Dept. of State)	
: <u></u> :210000344403		
(Document Number of	of Corporation (if known)	
tursuant to the provisions of section 607, 1006, Florida Statutes, this is Articles of Incorporation:	Florida Profit Corporation adopts the following amending	
If amending name, enter the new name of the corporation:		
	The new	
ame 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 name must contain the word	
Enter new principal office address, if applicable:	644 E Bloomingdale Ave	
Principal office address MUST BE A STREET ADDRESS )	Brandon, FL 33509	
Enter new mailing address, if applicable;	644 E Bloomingdale Ave	
Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	644 E Bloomingdale Ave	
. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	644 E Bloomingdale Ave Brandon, FL 33509	
Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)		
(Malling address <u>MAY BE A POST ÖFFICE BOX</u> )	Brandon, FL 33509	
Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address registered agent and/or the new registered office address	Brandon, Fl. 33509	
(Mailing address MAY BE A POST OFFICE BOX)  - If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	Brandon, Fl. 33509	
(Mailing address MAY BE A POST OFFICE BOX)  - If amending the registered agent and/or registered office add	Brandon, Fl. 33509	
(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office add new registered agent and/or the new registered office address  Name of New Registered Agent	Brandon, Fl. 33509	
(Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address registered agent and/or the new registered office address Name of New Registered Agent	Brandon, FL 33509  ress in Florida, enter the name of the	

Check if applicable ★ 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)

Example:

Please note the officer director title by the first letter of the office title:

P = President; V = Vice President; V = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer, CEO = Chief Exacutive Officer, CEO = Chief Exacutive 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 Doc	
X Remove	$\underline{V}$	Mike Jones	
X Add	$\underline{SV}$	Sally Smith	
Espe of Action Check One)	<u>l'itle</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Raymond Silva Jr	3602 Casaba Loop
Add			Valrico, FL 33596
X Remove			
2) Change	<u> </u>	Wiskenze Dulcio	1315 Oakfield Drive
Add			Brandon, Fl. 33509
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
🕏 Change			
Add			
Remove			
6) Change			
Add			
Remove			

	icles, enter change(s) here: (Be specific)
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	name made difference on annual nation of in and characteristics
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f an amendment provides for an exchi- provisions for implementing the amen (W not applicable, indicate N A)	adment if not contained in the amendment itself:
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	06/25/2021	in a decide
The date of each amendment(s) ad	option)	, if other than the
date this document was signed.	* 2021	
Effective date <u>if applicable</u> :	5/2021	
Flucture date il minimum .	tno more than 90 days after amendment file dater	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, the partment of State's records.	is 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 shareholder	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 amendatificient for approval.	nent(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following ste each voting group entitled to vote separately on the amendmentss:	atement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by Unity First Insurance C		
	rvoting groups	
06/25/2021		
Dated		
Signature	rector, president or other officer - if directors or officers have not b	neen
scleek	t, by an incorporator – if in the hands of a receiver, trustee, or other	court
	yd fiduciary by that fiduciary)	
	Wistenze Oulcib (Exped or printed name of person signing)  President/CEO	
	(Typed or printed name of person signing)	
	President/CEO	
	(Title of person signing)	