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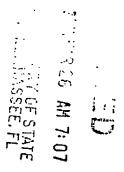
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: InsureSolutions Gr	oup Corp.		
DOCUMENT NUM	BER: P22000066088			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Ncole Zaldua			
		Name of Contact Person	า	
	InsureSolutions Group Corp.			
Firm/ Company				
	3100 SW 145 AVE			
		Address		
	Miami, FL 33175			
		City/ State and Zip Cod	e	<del></del>
	20nicoletta@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
				¥8.54
For further information	on concerning this matter, plea	se call:		SEE.
Nicole Zaldua		at ( <u></u>	417-1626	FL AIE
Name	of Contact Person	Area Co	de & Daytime Telephone	Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep.	artment of State:	
☐ \$35 Filing Fee	S43.75 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The C	Address  Iment Section on of Corporations Tentre of Tallahassee N. Monroe Street, Suite	: 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

of

InsureSolutions Group Corp.			£ C 4 11 4 13	
· · · · · · · · · · · · · · · · · · ·	of Corporation as curren	tly filed with the Florida Dept.	ot State)	
P22000066088				•
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation ado	pts the following amer	idment(s) to
A. If amending name, enter the new na	ame of the corporation:			
The Insurance Principal Incorporated			The	new.
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Torp," "Inc," or "Co".	A professional corporation nat	rthe abbreviation "Co. ne_must_contain_the \(\)	rp.," word
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		N/A		_
			(~1)	_
				_
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A		<del>.</del>
				- 11
			FFA C	
D. If amending the registered agent at new registered agent and/or the new registered agent and/or the new registered.	nd/or registered office ad- w registered office addres	dress in Florida, enter the name	e of the H	
Name of New Registered Agent	Nicole V. Benitez, CEO			
Name of New Registered Agent	3100 SW 145 AVE. Mia	mi. FL 33175		
		treet address)		
	N/A		m. ca.	
New Registered Office Address:		(City)	Florida(Zip Code)	_
		(Ciiv)	Tay Couch	
New Registered Agent's Signature, if c	hanging Registered Ager	it:	of the position	
I hereby accept the appointment as regis.	ierea agent i am jamittar -	wan ana accept the obligations	oj ine positim.	
	10	//·X		
_	100		<del>-</del>	
<del></del>	Signature of New	Registered Agent, if changing		

Check if applicable

The amendment(s) is/are being filed pursuant 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)

Example:

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
$\underline{X}$ Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	Nicole Zaldua	3100 SW 145 AVE
Add			Miami, Fl. 33175
X Remove			
2) Change	CEO	Nicole V. Benitez	3100 SW 145 AVE
X Add			Miami, FL 33175
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			<u> </u>
5) Change			SO DE SO
Add			
Remove			O7
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)			
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	(A)		<u></u> ; ; ;
	SEE S	- <del>-</del>	
		_ <del>-:-</del> -	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,			
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)			
N/A			
NA	<u> </u>		_
			_
			_

	3/20/24		, if other than the
The date of each amendment(s) ad date this document was signed.	option:		, if other than the
Effective date if applicable:			
<del></del> -	(no more than 90 days after t	amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutor partment of State's records.	ry filing requirements, this da	ite will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of dire	etors without shareholder acti	on and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of ficient for approval.	votes cast for the amendment(	s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting each voting group entitled to vote separat	groups. The following statemely on the amendment(s):	ent
"The number of votes cast	or the amendment(s) was/were sufficient	for approval	
Nicole Zaldua, Owner,	Registered Agent, President	••	
oy	(voting group)	<u></u> .	7.09 7.3 1.3
3/20/24			. ** <u>**</u>
Dated		. 1	
Signature	Mi //S-		S
/By a di	ector, president or other officer - if direct	tors or officers have not been	A C
selected appoint	, by an incorporator – if in the hands of a ed fiduciary by that fiduciary)	receiver, trustee, or other com	7: 07 7: 07 E <sub>E</sub> FL
• •	Nicole Zaldua		- H -
	(Typed or printed name of pers	son signing)	
	President		
	(Title of person signing)		