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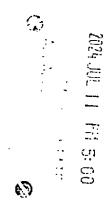
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## **COVER LETTER**

TO: Amendment Section Division of Corporations MARSH NAME OF CORPORATION: DOCUMENT NUMBER: \_\_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: THOMAS A. MULLANY

Name of Contact Person

MARSH & MULLANY INC.

Firm/Company 11262 RIVERWOOD PLACE.
Address NORTH PALM BEACH FLOPIDA 33408
City/ State and Zin Code Tonnulary 46 & GMAIL, Com.
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: THOMASA MULLANY at (516) 695-4512

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & Certificate of Status ☐ \$35 Filing Fee ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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** Articles of Incorporation of

MARSH & MULI	ANY, INC.	
(Name of Corporation as currently	filed with the Florida Dept. of State)	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	lorida Profit Corporation adopts the following amend	dment(s) to
A. If amending name, enter the new name of the corporation:		
MARSH & MULLANY INSURAN	ICE INC. The	new
mame must be distinguishable and contain the word "corporation," "co" "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association." or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corprofessional corporation name must contain the w	p" vord
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A.	
		_ _
D. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the	
new registered agent and/or the new registered office address:	; ;= ;= ;	
Name of New Registered Agent //	<del>]</del>	
/		.,
(Florida stree  New Registered Office Address:	t address) : (7)	
	City) (Zip Code)	_
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.	
Signature of New Reg	ristered 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 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	$\underline{\mathbf{V}}$	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		$\mathcal{N}/\mathcal{A}$	
Add			
Remove			<del></del>
2) Change			
Add			
Remove 3) Change	<del></del>		
Add			
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4) Change	<del></del>		
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Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	adding additional Artical sheets, if necessary).	(Be specific)			
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<u>provisions for</u>	implementing the amer	ndment if not contai	ned in the amendr	nent itself:	
(if not app	licable, indicate N/A)				
	NA				<del></del>

•

The date of each amendment(s) addate this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements partment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareho	elder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amo	endment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated	6/24/2024	
Signature		
(By a di	rector, president of other officer - if directors or officers have n	ot been
	I, by an incorporator — if it the hands of a receiver, trustee, or o ed fiduciary by that fiduciary)	ther court
	·- ·	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	(Title of person signing)	ARU
	(Title of person signing)	