P23000015948

(Re	equestor's Name)	
(Ac	idress)	
	ldress)	
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(Cit	ty/State/Zip/Phone #	#)
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	<u> </u>
(,
(Do	ocument Number)	
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05/07/24--01035--016 **35.00

COVER LETTER

NAME OF CORPORATION: CLAYTON MULTI INSURANCE, INC The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CAD G CMAIL (101) used for future annual report notification) For further information concerning this matter, please call: 6 301-2369 -7786-301-2369
Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ₹ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filling Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) tAdditional Copy

Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section Division of Corporations

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

is enclosed)

Articles of Amendment to Articles of Incorporation of

CLAYTON MULTI INSURANCE, INC.

(Name o	Corporation as currently	filed with the Florida Dept. of State)	
P23000015948			
_	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this Fl	orida Profit Corporation adopts the following	amendment(s)
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must he distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A p	mpany," or "incorporated" or the abbreviation professional corporation name must contain	
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)			
(Stating Buares) SIAT BE A FOST)	OFFICE BUX		
			
D. If amending the registered agent an		ss in Florida, enter the name of the	
new registered agent and/or the nev			
Name of New Registered Agent	Keith Isaiah Heno		
	8950 SW 74TH COURT 220	H MIAMI, FL 33156	
	(Florida street	t address)	
New Registered Office Address:	Miam:	, Florida	
	(C	(Zip Co	de)
New Registered Agent's Signature, if chereby accept the appointment as regist		th and accept the obligations of the position.	
4	248		
	744 Signature of Very Rea	nstered Agent, if changing	
	Signature by New Reg	micreo rigeat, y enunging	
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)

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 PID.

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: <u>X</u> Change	<u>PT</u>	John Dog	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	Р	Michael Heno Sr	8950 SW 74TH COURT
Add			MIAMI, FL 33156
X Remove			
2) X Change	P	Keith Isaiah Heno	8950 SW 74TH COURT
Add			MIAMI, FL 33156
Remove 3) Change			
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
51 Change	<u></u>		
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Re specific)			
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f			1 -1	
f an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or adment if not contained	in the amendment its	rif:	
(if not applicable, indicate N/A)				
				
			_	

The date of each a date this document		doption;		, if other than the
Effective date <u>if a</u>	opticable:			
		(no more than 90 do	iys after amendment file date)	
		lock does not meet the applicable partment of State's records.	e statutory filing requirements, this date	will not be listed as the
Adoption of Amer	ndment(s)	(CHECK ONE)		
The amendment action was not re		pted by the incorporators, or boar	rd of directors without shareholder action	and shareholder
		pied by the shareholders. The nu flicient for approval.	mber of votes east for the amendment(s)	
must be separat	tely provided for		h voting groups. The following statemen separately on the amendment(s):	ıt.
bv	CCT OT TOTAL FEIGH	tor the amendmentest was were s	amerent to approvar	
٠٠. ــــــ		(voting group)		
С	04/30/2024 Dated		_	
S	ignature	274		
	selecte	•	- if directors or officers have not been nds of a receiver, trustee, or other court	
		Keith Heno		
		(Typed or printed nam	e of person signing)	
		VP		

(Title of person signing)