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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Dean Insurance Flo	orida, inc.	
DOCUMENT NUM	P23000037919		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Justin Dean		
		Name of Contact Persor	1
	Dean Capital Group, inc.		
		Firm/ Company	
	2030 Royal Oak Ct		
	•	Address	<u> </u>
	Orlando, FL 32836		
		City/ State and Zip Code	2
	justinedwindean@gmail.com	1	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Justin Dean		407 at (271-9466
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.C	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio The Co	Address Iment Section In of Corporations In of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Dean Insurance Florida, inc.	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P23000037919	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Hyperlink Insurance, inc.	The new
name 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.	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
	AUG.
D. 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	E PROPERTY OF THE PROPERTY OF
Name of New Registered Agent	27 0
(Florida st	reer address)
	•
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
Signature of New F	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)

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.

Example: X Change	<u>PT</u>	John Doe	
_			
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change			
Add			
Remove			
2) Change			
Add			-
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			·
6) Change	_		
Add			1
Remove			

/A	ch additional sheets, if necessary).	es, enter change(s) here (Be specific)			
					
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If an	amendment provides for an exchan	ige, reclassification, or	cancellation of issued	shares.	
prov	visions for implementing the amend	ment if not contained in	n the amendment itse	elf:	
	(if not applicable, indicate N/A)				
Α					
			<u> </u>		
		-	. <u> </u>		
			-		

	t 6th, 2024
The date of each amendment(s) adoption:date this document was signed.	, if other than the
August 6th, 2024	
Effective date if applicable:	
(no	o more than 90 days after amendment file date)
Note: If the date inserted in this block does not m document's effective date on the Department of Stat	neet the applicable statutory filing requirements, this date will not be listed as the's records.
Adoption of Amendment(s) (CHECI	K ONE)
■ The amendment(s) was/were adopted by the inco action was not required.	rporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shar by the shareholders was/were sufficient for appro	eholders. The number of votes cast for the amendment(s) oval.
	areholders through voting groups. The following statement up entitled to vote separately on the amendment(s):
"The number of votes east for the amendme	ent(s) was/were sufficient for approval
Board of Directions & President	••
by	
(voting §	роцр)
August 6th, 2024 Dated Signature	
(By a director president	t or other officer – if directors or officers have not been
selected by an incorpor	ator - if in the hands of a receiver, trustee, or other court
appointed fiduciary by t	that fiduciary)
Justin Dean	
(Тур	ed or printed name of person signing)
President	
(Titk	e of person signing)

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