L 11	equestor's Name	
	N INS. ADVISORS INC	'X
▲ 419 WLST	49 ST # 109 FL 33012	
City/Stat	e/Zip Phone #	Office Use Only
CORPORATION	N NAME(S) & DOCUMENT NUI	MBER(S), (if known):
		1000022653918
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Walk in Mail out	Pick up time Will wait Photocopy AMENDMENTS Amendment	Certified Copy
Walk in Mail out NEW FILINGS Profit NonProfit	Pick up time Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Dir	Certified Copy Certificate of Status
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability	Pick up time Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Dir Change of Registered Agent	Certified Copy Certificate of Status 97 NIG 13
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other	Pick up time Will wait Photocopy AMENDMENTS Amendment Resignation of R.A., Officer/ Dir Change of Registered Agent Dissolution/Withdrawal Merger	Certified Copy
Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other	Pick up time Will wait Photocopy AMIENDMENTS Amendment Resignation of R.A., Officer/ Dir Change of Registered Agent Dissolution/Withdrawal Merger	Certified Copy Certificate of Status 97 AUG 13 AH 8: 13 13 AH 8: 13
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Walk in Mail out NEW FILINGS Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report	Pick up time Will wait Photocopy AMIENDMENTS Amendment Resignation of R.A., Officer/ Dir Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/ QUALIFICATION	Certified Copy Certificate of Status 97 AUG 13 AH 8: 13 13 AH 8: 13

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Examiner's Initials

ARTICLES OF AMENDMENT

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ARTICLES OF INCORPORATION

OF

CARIBBEAN INSURANCE ADVISORS, CORP.

(present name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate article number(s) being amended, added or deleted) ARTICLE V (delete) : GLADYS C. RIOS (OLD REGISTERED AGENT) (NEW REGISTERED AGENT) (add) : JESUS A. RUBALCABAL 11752 SW 188th TERRACE MIAMI, FL 33177 ARTICLE VI (delete): GLADYS C. RIOS PEDRO J. RIOS (add): JESUS A. RUBALCABAL (PRESIDENT/SECRETARY/TREASURER) 11752 SW 188th TERRACE MIAMI, FL 33177 Assign to JESUS A. RUBALCABAL the title of: PRESIDENT, SECRETARY and TREASURER. ARTICLE VII (add): JESUS A. RUBALCABAL 11752 SW 188th TERRACE MIAMI, FL 33177 Assign to JESUS A. RUBALCABAL the 100% of the shares and suscribe him as the only and new owner of said Corporation.

SECOND: 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, are as follows:

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THIRD: The date of each amendment's adoption: JULY 1st, 1997

FOURTH: Adoption of Amendment(s) (check one):

- ____ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
- ____ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- XX The amendments(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.

____ The amendment(s) was/were approved by the shareholders through voting groups.

[The following statement must be separately provided for each group entitled to vote separately on the amendment(s).]

The number of votes cast for the amendment(s) was/were sufficient for approval by ______.

(voting group)

19⁹⁷ Signed this ^{1st} JULY day of Signature

(By the Chairman of the Board of Directors, President or other officer if adopted by the shareholder's)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

GLADYS C. RIOS

Typed or printed name

PRESIDENT

Title

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of florida, submits the following statement in designation the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: ____CARIBBEAN INSURANCE ADVISORS, CORP.

2. The name and address of the registered agent and office is:

JESUS A. RUBALCABAL

(NAME)

11752 SW 188th TERRACE

(P.O. BOX NOT ACCEPTABLE)

MIAMI, FL 33177

(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE	M	
DATE	JULY 1st, 1997	