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A. RAMSEY AUG & 1. 2024

COVER LETTER

TO: Amendment Section
Division of Corporations

.

NAME OF CORPO	RATION: LONDON TRAFFI	C SCHOOL INC.	<u></u>			
DOCUMENT NUM	BER:					
	of Amendment and fee are sub	omitted for filing.				
Please return all corre	spondence concerning this mat	ter to the following:				
	LUIS DIAZ					
		Name of Contact Person				
	LONDON TRAFFIC SCHOOL INC.					
		Firm/ Company				
	P.O. BOX 140083					
Address						
	MIAMI, FLORIDA. 33114					
	-	City/ State and Zip Code	2			
	LNDNINS@BELLSOUTH.	NET				
	E-mail address: (to be us	ed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
LUIS DIAZ		at (de & Daytime Telephone Number			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:			
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 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 Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

to

LONDON TRAFFIC SCHOOL INC.		2024 AHC 13 AM 8: 35
(Name of Corporation	on as currently filed with the Flori	
P94000090719		· · · CARY OF BIAT
(Docum	ent Number of Corporation (if know	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpo	ration adopts the following amendment(
A. If amending name, enter the new name of the co	rporation:	
LONDON INSURANCE GROUP INC.		The new
name must he distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	' or "Co". A professional corpo	porated" or the abbreviation "Corp.," ration name must contain the word
B. Enter new principal office address, if applicables (Principal office address MUST BE A STREET ADD	i DRESS)	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u></u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered in the new registered.	red office address in Florida, ente office address:	r the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		. Florida
New Registered Office Authors.	(Ciŋ·)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	<u>vistered Agent:</u> I am familiar with and accept the o	bligations of the position.
Signo	ature of New Registered Agent, if cl	nanging

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.

X Change	<u>PT</u>	<u>John Do</u>	<u>e</u>		
X Remove	V	Mike Jo	nes		
X Add	<u>SV</u>	Sally Sn	nith		
Type of Action (Check One)	Title		<u>Name</u>	Ė	Address
1) Change		_		_	
Add				_	
Remove				_	
2) Change		_		_	
Add				_	
Remove 3) Change		_		 	
Add					
Remove				_	
4) Change		_		_	
Add				_	
Remove				_	
5) Change				_	
Add				_	
Remove				_	
6) Change		<u> </u>		_	
Add				_	
Remove					

Attach additional sheets, if necessary).	(Be specific)
<u>-</u>	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

•	3/8/2024	
The date of each amendment(s) adoption	on:	, if other than the
date this document was signed. 8/8/2024		
Effective date <u>if applicable</u> :		
	(no more than 90	days after amendment file date)
Note: If the date inserted in this block of document's effective date on the Departm		ble statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted t action was not required.	by the incorporators, or bo	oard of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	-	number of votes east for the amendment(s)
must be separately provided for each	voting group entitled to vo	
"The number of votes cast for the	e amendment(s) was/were	sufficient for approval
by		· · · · · · · · · · · · · · · · · · ·
•	(voting group)	
8/8/2024 Dated		
Signature		
selected, by a	•	r – if directors or officers have not been hands of a receiver, trustee, or other court
LUIS	S DIAZ	
	(Typed or printed na	ame of person signing)
PRES	SIDENT	

(Title of person signing)