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2008 APR 18 PM 2: 30

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	BROWN INSURANCE, INC
DOCUMENT NUMBER:	P95000021981
The enclosed Articles of Amendment and f	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
D	ENISE BROWN
(Na	ame of Contact Person)
BROW	N INSURANCE INC
	(Firm/ Company)
1872 TAMI	AMI TRAIL S. SUITE G
	(Address)
VE	ENICE, FL 34293
(Ci	ty/ State and Zip Code)
For further information concerning this mat	tter, please call:
DENISE BROWN	at ( <u>941</u> ) <u>493-1886</u>
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	nt:
✓ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

2008 APR 18 PM 2: 30
SECRETARY OF

BROWN INSURANCE, INC

SECRETARY
OF STATE

(Name of corporation as currently filed with the Florida Dept. of State ASSEE, FLORIDA

DEFENDANCE.

P95000021981
(Document number of corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

## **NEW CORPORATE NAME (if changing):**

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
CHANGE JERRY W BROWN TO PRESIDENT ONLY.
ADD NOEL E BROWN, 1672 WALDORF DRIVE NORTH PORT,FL 34288 AS SECRETARY
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provision for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate National Content of the Amendment itself) (if not applicable, indicate National Content of the Amendment itself) (if not applicable, indicate National Content of the Amendment itself) (if not applicable, indicate National Content of the Amendment itself) (if not applicable, indicate National Content of the Amendment itself) (if not applicable, indicate National Content of the Amendment itself) (if not applicable, indicate National Content of the Amendment itself) (if not applicable, indicate National Content of the Amendment itself) (if not applicable, indicate National Content of the Amendment itself) (if not applicable, indicate National Content of the Amendment itself) (if not applicable, indicate National Content of the Amendment itself) (if not applicable, indicate National Content of the Amendment itself) (if not applicable, indicate National Content of the Amendment itself) (if not applicable, indicate National Content of the Amendment of

(continued)

The date of each amendment(s) adoption: 04/15/2008
Effective date if applicable: 04/15/2008
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders 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 voting 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)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature  (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
DENISE BROWN
(Typed or printed name of person signing)
VICE PRESIDENT - BROWN INSURANCE, INC.
(Title of person signing)

FILING FEE: \$35