

P970000096033

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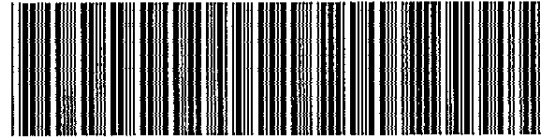
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FILED
06 JAN 25 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
06 JAN 25 PM 2:39
STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARE
16606

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Florida Home Builders Insurance Agency, Inc.

DOCUMENT NUMBER: P97000096033

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John W. Forehand

(Name of Contact Person)

Lewis, Longman & Walker, P.A.

(Firm/ Company)

125 S. Gadsden Street, Suite 300

(Address)

Tallahassee, FL 32301

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

John W. Forehand

(Name of Contact Person)

at (850) 222-5702

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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

Street Address

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment
to
Articles of Incorporation
of

Florida Home Builders Insurance Agency, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

FILED
06 JAN 25 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P97000096033

(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):

Florida Home Builders Insurance, Inc.

(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)**

ARTICLE V: PRINCIPAL OFFICE: This corporation shall have its principal office in the city of

Tallahassee, county of Leon, state of Florida, at 1725 Hermitage Blvd., Tallahassee, Florida 32308.

The mailing address for the corporation shall be Post Office Box 15459, Tallahassee, Florida 32317.

ARTICLE VI: REGISTERED AGENT AND OFFICE: The street address of the registered office of this

corporation in the state of Florida is 1725 Hermitage Blvd., Tallahassee, Florida 32308. The Directors

may from time to time move the registered office to any other address in Florida. The registered agent

of this corporation is TOM L. WILLIAMS, whose address is 1725 Hermitage Blvd., Tallahassee, Florida

32308.

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: 7-1-05

Effective date if applicable: date of filing
(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.

Signed this 19th day of January, 2005 6

Signature Carolyn B Littlefield
(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)

Carolyn B. Littlefield
(Typed or printed name of person signing)

Chief Executive Officer
(Title of person signing)

FILING FEE: \$35