(Requestor's Name) (Address) 900035776259 (Address) (City/State/Zip/Phone #) PICK-UP TIAW MAIL 115/11/04--01060--019 **43.75 (Business Entity Name) (Document Number) Certified Copies ___ *Certificates of Status_

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TRANSMITTAL LETTER

TO: Amendment Section **Division of Corporations**

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT: Name	Change		
DOCUMENT NU	JMBER: P97000103620		
The enclosed Artic	cles of Amendment and fee are	submitted for filing.	
Please return all co	orrespondence concerning this	matter to the following:	
Dav	d A. Kossak		
	(Name	e of Person)	
Davi	d A. Kossak insurance Agency, In		<u> </u>
	(Name of I	firm/ Company)	
9995	Gate Parkway North, Suite 320		
	(A	ddress)	·
Jack	sonville, FL 32246		
	(City/ State	/ and Zip Code)	
For further informa	ation concerning this matter, pl	ease call:	-
David A. Kossak		at (904) 645-5558	3
	(Name of Person)	(Area Code & Daytime	·
Enclosed is a checl	k for the following amount:		
□ \$35 Filing Fee	Ø \$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		Street Address	
Amendment Section Division of Corporations		Amendment Section	
DIVISION OF COSPORATIONS P.O. Boy 6227		Division of Corporations	

409 E. Gaines Street

Tallahassee, FL 32399

Articles of Amendment to Articles of Incorporation of

TALLAHARY OF STATE

pt. of State)

David A. Kossak Insurance Agency, Inc.

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

P97000103620	
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(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):

The Nossak Companies Incorporated
(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
<u>AMENDMENTS ADOPTED</u> - (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (<u>BE SPECIFIC</u>)
(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/.

(continued)

The date of each amendment	t(s) adoption: April 28, 2004
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	was/were approved by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.
	was/were approved by the shareholders through voting groups. The t must be separately provided for each voting group entitled to vote mendment(s):
"The number of	f votes cast for the amendment(s) was/were sufficient for approval by
W.g	(voting group)
	was/were adopted by the board of directors without shareholder action tion was not required.
☐ The amendment(s) shareholder action	was/were adopted by the incorporators without shareholder action and was not required.
Signed this 28th day of	<u>April</u> , <u>2004</u> .
(By a c	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
David	d A. Kossak (Typed or printed name of person signing)
Pres	ident
	(Title of person signing)

FILING FEE: \$35