P97000105944

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<u>.</u> [COVER LETTER
TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: WAMPLER INSUR.	ANCE GROUP, INC.
DOCUMENT NUMBER: P97000105944	
	and the Gline
The enclosed Articles of Amendment and fee are subr	
Please return all correspondence concerning this matter	er to the following:
LO	RI WELLBAUM EMERY
- 	Name of Contact Person
WE	LLBAUM & EMERY, P.A.
	Firm/ Company
	N. INDIANA AVENUE
	Address
ENC 1	GIEWOOD, FL 34223
	City/ State and Zip Code
lemen a welloo	I for future annual report notification)
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	L Call-
For further information concerning this matter, prease	
Lovi Wellbaum Emery	at (941) 474-324
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

	Articles of Amen	unent	
	Articles of Incorp	oration	
	wampler insurance	GROUP INC	
(Nama of I	Corporation as currently fil		of State)
(ivame of v	P97000		<u>· · · · · · · · · · · · · · · · · · · </u>
	(Document Number of Co		
Pursuant to the provisions of section 607.10 as Articles of Incorporation:	11		lopts the following amendment(s) t
-			
A. If amending name, enter the new nam	e of the corporation:		
		113	The new
ame must be distinguishable and contain the Inc.," or Co.," or the designation "Cor chartered," "professional association," or	rp," "Inc." or "Co". A pr	ofessional corporation n	ame must contain the word
3. Enter new principal office address, if	applicable:		
Principal office address <u>MUST BE A STR</u>	REET(ADDRESS)	_ _	
	- -		<u> </u>
. Enter new mailing address, if applica	ible:	`	
(Mailing address MAY BE A POST OF	FIGE BOX)		
	_		<u> </u>
			ne of the
	-		,
). If amending the registered agent and/	or registered office address	in Florida, enter the nar	ne of the
new registered agent and/or the new r	egistered office address:		
Name of New Registered Agent	LORI WELLBAUM EME	RY, ESQ.	
	686 N. Indiana Av	renue	
_	(Florida street a		
			, Florida_34223
New Registered Office Address:	Englewood (City		(Zip Code)
		•	, ,
	, , ,		
	11 1		
iew Registered Agent's Signature, if cha	nging Registered Agent:		
New Registered Agent's Signature, if cha hereby accept the appointment as registere	nging Registered Agent: ed agent! I am familiar with	and accept the obligation	s of the position.
iew Registered Agent's Signature, if cha hereby accept the appointment as registere	nging Registered Agent:	and accept the obligation.	s of the position.
iew Registered Agent's Signature, if cha hereby accept the appointment as registere	nging Registered Agent: ed agent! I am familiar with	and accept the obligation:	s of the position.
iew Registered Agent's Signature, if cha hereby accept the appointment as registere	ed agent. I am familiar with	S	s of the position.
iew Registered Agent's Signature, if cha hereby accept the appointment as registere	ed agent. I am familiar with	and accept the obligation.	s of the position.
Sew Registered Agent's Signature, if charlereby accept the appointment as registered because the appointment as registered because the applicable being filed pursuance to the amendment of the a	Signature of New Regist	tered Agent, if changing	s of the position.

address of each Offic (Attach additional she Please note the officer P = President; V= Vi Executive Officer; CFO President, Treasurer, t Changes should be no	er and/or Dire ets, if necessary /director title h ce President; 1 O = Chief Fina Director would ted in the follow leaves the corp ove, and Sally S	ector being added: by the first letter of the office title: T = Treasurer, S = Secretary; D = Director notal Officer. If an officer/director holds not be PTD. wing manner: Currently John Doe is listed poration, Sally Smith is named the V and S	officer/director being removed and title, name, and TR= Trustee; C = Chairman or Clerk; CEO = Chief more than one title, list the first letter of each office held. These should be noted as John Doe, PT as a Change,
X Remove		like Jones	
		ally Smith	
X Add Type of Action (Check One)	<u>SV</u> <u>S</u> <u>Title</u>	Name	Address
1) Change	VPSD	TONYA S. WAMPLER	P.O. BOX 506
			ENGLEWOOD, FL 34295
Add X			
Remove 2) X Change	DP T	DAVID R. WAMPLER	1201 S. McCALL RD
			ENGLEWOOD, FL 34223
Add		•	
Remove 3) Change	DVPS	JONATHAN VARNER	1201 S. McCALL RD
X Add			ENGLEWOOD, FL 34223
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
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Add			
Remove			

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F. If amending or adding additional Articles,	ènter	change(s) here:
(Attach additional sheets, if necessary). (Be	spec	fic)
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F. If an amendment provides for an exchange	reck	issification, or cancellation of issued shares.
provisions for implementing the amendment (if not applicable, indicate N/A)	ent if	not contained in the amendment itself:
(ly not appricable, marcule 10/A)		
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The date of each date this docum	h amendment(s) ad ent was signed.	option:	ions I	, 2020	, if other th
Effective date <u>i</u>	-			10101	
•		(no more	than 90 days	after amendment file dat	e)
Note: If the da document's effe	te inserted in this ble ective date on the Dep	ock does not meet the partment of State's rec	applicable s ords.	atutory filing requireme	nts, this date will not be listed
Adoption of Ar	mendment(s)	(CHECK ON	Ð		
☐ The amendmaction was no		oted by the incorporate	ors, or board (of directors without share	cholder action and shareholder
The amendm by the share	ent(s) was/were adop holders was/were suf	oted by the shareholde ficient for approval.	rs. The numb	per of votes east for the an	mendment(s)
☐ The amendar must be sept	nent(s) was/were apported for a	oved by the sharehold each voting group enti	ers through v tled to vote se	oting groups. The follow parately on the amendme	ing statement ent(s):
"The n	umber of votes cast f	or the amendment(s) v	vas/were suff	icient for approval	
bу <u></u>		(voting group)		"	
	selected		if in the hand	directors or officers have s of a receiver, trustee, or	
		David	$f \in \mathbb{R}$	Wampler	-
	-	(Typed or p	rinted name (of person signing)	
			eside	n+	
		(Title of per	rson signing)		