P98000068095

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SECRETARY OF STATE VLLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 7, 2005

ANTHONY SOLETTI TS JOSIE INSURANCE SERVICES, INC. 4904 W. CYPRESS STREET TAMPA, FL 33607

SUBJECT: TS JOSIE INSURANCE SERVICES, INC.

Ref. Number: P98000068095

We have received your document for TS JOSIE INSURANCE SERVICES, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Letter Number: 405A00070782

Karen Gibson Document Specialist

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TS JOSIE	E INSURANCE SERVICES, INC	<u> </u>
DOCUMENT NUMBER: P98000068095		
The enclosed Articles of Amendment and fee	e are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
ANTHONY SOLETTI		
(Nan	ne of Contact Person)	
TS JOSIE INSURANCE S	SERVICES, INC.	
	(Firm/ Company)	
4904 W. CYPRESS STREE	ET	
	(Address)	
TAMPA, FL 33607		
(City	/ State and Zip Code)	
For further information concerning this matter	er, please call:	
LISA PENA	at (813) _288-021	
(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amoun	t:	
\$35 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	Street Address Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Ci	role
1 and	Tallahassee, FL 32301	icic

Articles of Amendment to Articles of Incorporation of

15 JUSIE INSURANCE SERVICES, INC.		
(Name of corporation as currently	filed with the Florida Dept. of State)	L A
		HET.
P98000068095		SSE
	f corporation (if known)	- jijg
(Document name)	recipolation (if known)	70
ursuant to the provisions of section 607.1006, Flo	orida Statutes, this Florida Profit Corp	poratioB }
dopts the following amendment(s) to its Articles		Q A
		•
EW CORPORATE NAME (if changing):		
	HYDE PARK INSURANCE SERVI	CES, INC.
Must contain the word "corporation," "company," or "incor	porated" or the abbreviation "Corp.," "Inc.," of	or "Co.")
A professional corporation must contain the word "chartere	d", "professional association," or the abbrevia	ation "P.A.")
MENDMENTS ADOPTED CORRED OF AN	NABATE OHANGEN Indicate Action	Number(e)
MENDMENTS ADOPTED - (OTHER THAN nd/or Article Title(s) being amended, added or de		ivuiiidei(S)
mayor Article Trile(s) being amended, added or de	icted. (<u>Be si Len te</u>)	
	555	
		
		 .
		,
(Attach additional	al pages if necessary)	
f an amandmant maridae for anakanaa madagaifi	action or concellation of issued share	e provisio
f an amendment provides for exchange, reclassifi or implementing the amendment if not contained		
or implementing the amendment it not contained	in the amendment itself. (if not applicate	and minimum 1

(cor	ntinued)	

The date of each amendment(s) adoption: November 30, 2005
Effective date if applicable: January 1, 2006 (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)
ANTHONY SOLETTI
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

FILING FEE: \$35