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COVER LETTER

TO: Amendment Section Division of Corpora			1-4 July - July 1	
NAME OF CORPORA	TION: E-ZC	LAIMS, INC		
DOCUMENT NUMBE	R: <i>P9800</i>	0095-210		
The enclosed Articles of	Amendment and fee are su	abmitted for filing.		
Please return all correspo	ondence concerning this ma	itter to the following:		
-	EUZABETH	PALOMO Name of Contact Person		
	01:	Name of Contact Person	n	
_	1= - 4 C/ain	is Lac.		
		rirm/ Company		
_	1495 SW	Name of Contact Person 15 Inc. Firm/ Company 13 TH Place. Address		
	ρ	Address		
	Doca Katon	FL 33486	6-5376	
		eny, state and sup cou		
	epalomo @	azclaimsbilli sed for future annual report	ing.com	
	E-mail address: (to be us	sed for future annual report	no(ification)	
For further information of	oncerning this matter, pleas	se call:		
Fliza beth	Palono	at (_ 5~6/		
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	he following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	S43.75 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)	
	g Address		Address	
Amendment Section			ment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

E-Z Clains	Inc.	44. July - 5 1. 1. 1. 1.
(Name of Corporation as currently	y filed with the Florida	
P98000096	210	
	f Corporation (if known))
Pursuant to the provisions of section 607.1006, Florida Statutes, this at its Articles of Incorporation:	Florida Profit Corporal	tion adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:		
N/A.		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "oword "chartered," "professional association," or the abbreviation ". B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Co". A professional co P.A."	ncorporated" or the abbreviation or
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1495 SW Boca RAT	1 13 TH Place 00, FL 33486-5376
D. If amending the registered agent and/or registered office address: Name of New Registered Agent Lizabeth	Palomo	e name of the
1495 SW 13	3th Place,	
(Florida stre New Registered Office Address: Boca Rator	eet address)	, Florida <u>33486 - 5</u> 376
f	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am fumiliar w Signature of New Re	vith and accept the oblig	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	D	Elaine Mangles	21631 Bronado Avenue Boca laton, Fr 23433-7548
Add Remove		·	Boca laton, Fr 33433-7548
Remove			
2) Change			
Add			 -
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			-
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
		•
		
-		
an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,	
provisions for implementing the amen-	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		_

The date of each amendment(s) adoption: Mard 4th, 2019	, if other than the
date this document was signed.	
Effective date if applicable: March 4th, 2019	
(no more than 90 days after amendment file date)	· -
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted 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.	
Dated May 80 th / 2019	
Signature (By a director, president of 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)	
El.2abeth lalomo . (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President - Director	
(Title of person signing)	