## P21000102798

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SECRETARY OF STATE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Sackmann Life Sec	curity CO.			
DOCUMENT NUN	1BER: P21000102798	-			
	es of Amendment and fee are su	bmitted for filing.			
Please return all cor	respondence concerning this ma	itter to the following:			
	Teresa Sackmann				
	Name of Contact Person				
	Sackmann Life Security CO.				
	-	Firm/ Company			
	122 Sea Trail				
	Address				
	Palm Coast, Florida 32164				
	-	City/ State and Zip C	ode		
	Sackmanninsurancesfg@gma	nil.com			
	E-mail address: (to be us	sed for future annual rep	ort notification)		
For further informat	ion concerning this matter, plea	se call:			
Teresa Sackmann		at ( <u>386</u>	566-8308  Code & Daytime Telephone Number		
Name	e of Contact Person	Area	Code & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida D	epartment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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		Street Address Amendment Section Division of Corporations			
	O. Box 6327	The Centre of Tallahassee			
Ta	llahassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

## FILED

2022 MAR 14 PM 3: 14

(Name of Corporation as curren	tly filed with the Florida Depts FISHE ARY OF STATE
Sackmann Life Security Co. Doc# P21000102798	TALL AHASSEE, FL
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Sackmann Financial Group Inc.	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	<del></del>
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	t-
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New .	Registered Agent, if changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	(e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	<u>John Do</u>	<u>) e</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) XX Change	PTD		Teresa J Sackmann	122 Sea Trail
Add				Palm Coast Florida 32164
Remove				
2) XX Change	VS	_	William R Sackmann	122 Sea Trail
Add				Palm Coast Florida 32164
Remove 3 ) Change		_	·	
Add				
Remove				
4) Change		_		
Add				·
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary). (Be specific)				
				<del></del>
				<del></del>
			<del></del>	
	•			
	<b></b>	<del></del> -		
		•		
an amendment provides for an exchange, reclassifica	ation, or cancel	lation of issued sh	iares,	
provisions for implementing the amendment if not con	ntained in the a	mendment itself:		
(if not applicable, indicate N/A)				
		<del>-</del> -		
	<del></del>			
			·	

. . .

The date of each amendment( date this document was signed.	s) adoption:	, if other than the
	3/11/2022	
Effective date <u>if applicable</u> :	(no more than 90) days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder as	etion and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment e sufficient for approval.	nt(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
sele	a director, president or other officer – if directors or officers have not bee exted, by an incorporator – if in the hands of a receiver, trustee, or other exponent of fiduciary by that fiduciary)	
	Teresa Sackmann	
	(Typed or printed name of person signing)	
	CEO Sackmann Life Security CO.	
	(Title of person signing)	