

F07000002904

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

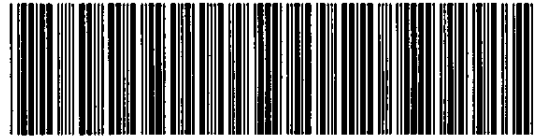
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



300255271903

01/21/14--01046--019 \*\*25.00

02/10/14--01045--003 \*\*10.00

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14 FEB -7 PM 3:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AA  
Change  
02-11-14  
Dc



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 29, 2014

ATTN: ELIZABETH DAWSON  
C/O CORPORATION SERVICE COMPANY  
2711 CENTERVILLE ROAD, SUITE 400  
WILMINGTON, DE 19808

SUBJECT: TITAN AUTO INSURANCE OF NEW MEXICO, INC.  
Ref. Number: F07000002904

We have received your document for TITAN AUTO INSURANCE OF NEW MEXICO, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to file your document is \$35.

There is a balance due of \$10.00.

*Attached*

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) 245-6050.

Darlene Connell  
Regulatory Specialist II

Letter Number: 314A00001926

RECEIVED  
14 FEB -7 PM 1:06  
CORPORATIONS  
DIVISION  
FLORIDA



CORPORATION SERVICE COMPANY

CSC - WILMINGTON  
Suite 400  
2711 Centerville Road  
Wilmington De 19808  
800-927-9800  
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Elizabeth Dawson edawson@cscinfo.com

Date: January 17, 2014

Order#: 939766-056

Re: TITAN AUTO INSURANCE OF NEW MEXICO, INC.

Enclosed please find:

XX Change of Registered Agent and Office.  
XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.  
XX Issue Proof of Filing.  
XX Please return evidence to the following:

Attn: Elizabeth Dawson  
c/o Corporation Service Company  
2711 Centerville Road, Suite 400  
Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of New Mexico in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: TITAN AUTO INSURANCE OF NEW MEXICO, INC.

2. The principal office address: 5555 Zuni SE, Suite 2, Albuquerque, NM 87108

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 06/04/2007 Document number: F07000002904

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

C T Corporation System

1200 South Pine Island Road

Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

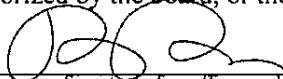
P.O. Box NOT acceptable

Tallahassee, FL 32301

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CORPORATION SERVICE COMPANY  
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

Dona Priebe, Vice President

Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Corporation Service Company

By:   
\_\_\_\_\_  
Signature of Registered Agent

01/14/2014

Date

If signing on behalf of an entity:

Elizabeth A. Dawson, Asst. Vice President

Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314