F08000001790

(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
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Achange Theress 3-10-10

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: Ascension Insurance Services, Inc.	oration)
DOCU	UMENT NUMBER: <u>F080000/190</u>)
The en	nclosed Statement of Change of Registered Office/A	gent and fee are submitted for filing.
Please	return all correspondence concerning this matter to	the following:
	Elizabeth A. Harker (Name of Contact	t Person)
	3H Agent Services, Inc. (Firm/Comp	any)
	6 Clement Avenue (Address)
	Saratoga Springs, NY 12866 (City/State and Z	ip Code)
For fur	rther information concerning this matter, please call:	
Elizab	oeth A. Harker (Name of Contact Person)	t (800) 796-7859 (Area Code & Daytime Telephone Number)
Enclos	sed is a \$35.00 check made payable to the Departmen	nt of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

statement of cha	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this cange is submitted for a corporation organized under the laws of the State of Delaware ler to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: Ascension Insurance Services, Inc.	
2. The principal	al office address: 87 E Green Street, Suite 206, Pasadena, CA 91101	
3. The mailing a	address (if different); 2345 Grand Blvd. 610	
4. Date of incorp	rporation/qualification: 04/21/2008 Document number: F08000001790	
	nd street address of the current registered agent and registered office on file with the artment of State:	ś
	Capitol Corporate Services, Inc.	_
	155 Office Plaza Dr. Ste. A	\
	Tallahassee FL 32301 US	
6. The name and (if changed):	and street address of the new registered agent (if changed) and /or registered office	,
	1970 Otter Way	
	(P.O. Box NOT acceptable)	
	Palm Harbor, Florida 34685	
The street addreas changed will	ress of its registered office and the street address of the business office of its registered agent, ll be identical.	
Such change wa authorized by the	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
hm	Roberts Underwood, President	
I hereby accept I further agree to of my duties, an document is bei corporation has	of the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this eing filed merely to reflect a change in the registered office address, I hereby confirm that the as been notified in writing of this change. Signature of Registered Agent) (Date)	
If signing on be	pehalf of an entity:	
3H Agent Ser	ervices, Inc. (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 CR2E045 (8/05)