

F11000000832

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

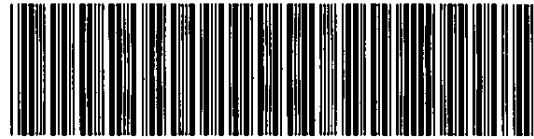
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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MAY 19 2015

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ASCENSION INSURANCE, INC.
Name of Corporation

DOCUMENT NUMBER: F11000000832

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gary Harker
Name of Contact Person

3H Corporate Services, LLC
Firm/Company

6 Clement Avenue
Address

Saratoga Springs, NY 12866
City/State and Zip Code

gary.harker@3hcs.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary Harker at (518) 583-0669 Ext. 111
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department 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

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 DE in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ASCENSION INSURANCE, INC.
2. The principal office address: 5825 MEDLOCK BRIDGE PKWY SUITE 200
JOHNS CREEK, GA 30022
3. The mailing address (if different): 9225 Indian Creek Parkway, Ste. 700
Overland Park, KS 66210
4. Date of incorporation/qualification: 02/22/2011 Document number: F11000000832
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)

3H Agent Services, Inc.

1970 Otter Way

Palm Harbor, FL 34685

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

3H Agent Services, Inc.

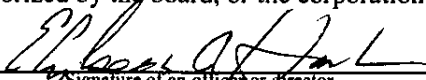
1415 Panther Lane, Suite 327

P.O. Box NOT acceptable

Naples, FL 34109

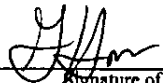
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Elizabeth Harker Attorney in Fact for the 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.


Signature of Registered Agent

5/6/2014

Date

If signing on behalf of an entity:

Gary Harker

Typed or Printed Name

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

SECRET
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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