

F13 000005011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

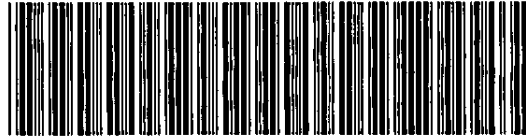
(Business Entity Name)

(Document Number)

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C. CARROTHERS

OCT 28 2014

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 OCT 26 PM 3:42

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Change of Registered Agent

Name of Corporation

DOCUMENT NUMBER: F13000005011

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:

Brian K. DeSousa

Name of Contact Person

Bay Agency Insurance Group Inc.

Firm/Company

P.O. Box 543

Address

Rumson NJ 07760

City/State and Zip Code

Brian_desousa@bayagency.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian Desousa

Name of Contact Person

at (732) 741-4637

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

1. The name of the corporation: Bay Agency Insurance Group Inc.
2. The principal office address: 93 East River Rd.
Rumson NJ 07760
3. The mailing address (if different): P.O. Box 543
Rumson NJ 07760
4. Date of incorporation/qualification: 8-20-1986 Document number: 0100302350
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)

NRAI Services Inc.
1200 S. Pine Island Rd.
Plantation FL 33324

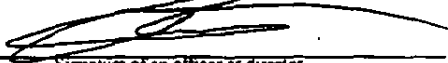
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Hubco Registered Agent Services Inc.
155 Office Plaza Dr. 1st Floor
P.O. Box NOT acceptable
Tallahassee FL 32301

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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

Brian K. DeSousa 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

10/20/2015

Date

If signing on behalf of an entity:

Bruce B. Hubbard, President

Typed or Printed Name

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