

P34609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

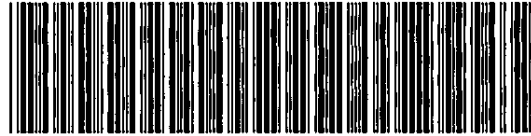
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/10/14--01045--006 **10.00

01/21/14--01046--011 **25.00

RECEIVED
FEBRUARY 11 2014

14 FEB -7 PM 3:28

FILED

PA Chang
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: NATIONWIDE FINANCIAL INSTITUTION DISTRIBUTORS
AGENCY, INC.
Ref. Number: P34609

We have received your document for NATIONWIDE FINANCIAL INSTITUTION
DISTRIBUTORS AGENCY, 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: 314A00001925

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JAN 30 7 PM 1:06

DEPT OF STATE
CORPORATION
REG. FLOOR



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#: 939764-315

Re: NATIONWIDE FINANCIAL INSTITUTION DISTRIBUTORS

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

1. The name of the corporation: NATIONWIDE FINANCIAL INSTITUTION DISTRIBUTORS AGENCY, INC.

2. The principal office address: Two Nationwide Plaza, Columbus, OH 43215

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 07/01/1991 Document number: P34609

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 S. 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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SECRETARY OF STATE
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