# 35385

(Re	equestor's Name)	
(Ad	ddress)	•.
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
. (В	usiness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Gave of to the correct data in



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#### **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Chartered Marketing S (Name of Corporation)	ervices, INC.
DOCUMENT NUMBER: P35385	
The enclosed Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to	the following:
Brett Bender (Name of Contact Person)	
Intersections (Firm/Company)	7 JUL 2:
14901 Bogle Drive (Address)	O7 JUL 23 AM 8: 00
Chantilly, VA 20151 (City/State and Zip Code)	- 100
For further information concerning this matter, please call:	
(Name of Contact Person) at (Area Code	2 & Daytime Telephone Number)
Enclosed is a check for the following amount:	
(Addi	\$5 Filing Fee & Certificate of Status & Certificate Copy (Additional copy is enclosed)
Mailing Address:Street AddressAmendment SectionAmendment SDivision of CorporationsDivision of CoP.O. Box 6327Clifton BuildiTallahassee, FL 323142661 ExecutiveTallahassee, FTallahassee, F	ection orporations ng ve Center Circle

## PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

### SECTION I (1-3 MUST BE COMPLETED)

	P353 85 (Document number of corporation (if known)
1. Chartered Market	ing Sewices, INC.  pration as it appears on the records of the Department of State)
2. Thinois (Incorporated under law	vs of)  3. 4/6/91 (Date authorized to do business in Florida)
(4-7 C	SECTION II OMPLETE ONLY THE APPLICABLE CHANGES)
its jurisdiction of incorporation?	of the corporation, when was the change effected under the laws of March 19, 2007  Surance Services INC.  Idment, adding suffix "corporation," "company," or "incorporated," or named in new name of the corporation)
business in Florida)	d of duration, indicate new period of duration.
7. If the amendment changes the jurisd	(New duration)  (New duration)  (New jurisdiction)  (New jurisdiction)
(Signature of a director, president o of a receiver or other court appoint	t of similar import, evidencing the amendment, authenticated not more thication to the Department of State, by the Secretary of State or other officin the jurisdiction under the laws of which it is incorporated.



### To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 20TH day of JULY A.D. 2007.

Authentication #: 0720100951 · Authenticate at: http://www.cyberdriveillingis.com

SECRETARY OF STATE