P92000040064

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To:
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From:
Account Name : THE BUSINESS LAW GROUP
Account Number : I20000000233
Phone : (407)835-1234
Fax Number : (407)425-0032

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REGISTERED AGENT CHANGE

NORTH AMERICAN LIABILITY GROUP, INC.

Certificate of Status	0
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NORTH AMERICAN LIABILITY GROUP, INC.
(Name of corporation)

DOCUMENT NUMBER: P92000004064

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:

J. BENNETT GROCOCK, P.A.
(Name of contact person)

(Firm/Company)

255 S. ORANGE AVE, SUITE 1201
(Address)

ORLANDO, FL 32801
(City/state and zip code)

For further information concerning this matter, please call:

NANCY MUNRO at (407) 581-3978
(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
409 E. Gaines Street
Tallahassee, FL 32399

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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 617.1308, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA *in order to change its registered office or registered agent or both, in the State of Florida.*

1. The name of the corporation: NORTH AMERICAN LIABILITY GROUP, INC.
2. The principal office address: 2929 E. COMMERCE BLVD. STE. 610 FORT LAUDERDALE, FL 33308
3. The mailing address (if different):
4. Date of incorporation/qualification: 11/13/92 Document number: P92000004064
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

HAROLD FISCHER
2929 E. COMMERCIAL BLVD., STE. 610
FT. LAUDERDALE, FL 33308

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

BRADLEY WILSON
255 S. ORANGE AVE, STE. 1201
(P.O Box NOT acceptable)
ORLANDO, FL 32801

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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 of the corporation. It was not notified in writing of the change.

X _____ BRADLEY WILSON, PRES.
(Signature of an officer) (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.

X _____ 9/29/04.
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

_____
(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

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