

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,	
the undersigned corporation organized under the laws of the State of <u>FLore</u> (df submits the following statement in order to change its registered office or registered	
the State of Florida.	
1. The name of the corporation is: School INSURANCE OF FLORIDA 1	46ency Inc
2. The mailing address of the corporation is: $\rho \circ \beta \circ 4250$	
WINTER PARIL FLA 32793	
3. Date of incorporation/qualification: 11/01/59 Document number:	217184
4. The name and address of the current registered agent and office:	
JOE H HUGHES JR. 3097 CAMP ROAD	- 1% - 5 3
3097 CAMP ROAD	7
oviedo FLA 32765	. .
5. The name and address of the new registered agent and office: (P. O. Box Not Acc	ceptable)
	Septable)
	₩ 3
The street address of its registered office and the street address of the business of agent, as changed, will be identical.	fice of its registered
Such change was authorized by resolution duly adopted by its board of directors of authorized by the board.	or by an officer so
	Date)
·	
J. H. Hughes Ja. V. P. 8 (Printed or typed name and title)	-/P-97 (Date)
Having been named as registered agent and to accept service of process for the a corporation, I hereby accept the appointment as registered agent and agree to act I further agree to comply with the provisions of all statutes relative to the proper performance of my duties, and I am familiar with and accept the obligation of my registered agent.	above stated t in this capacity. and complete
(Signature of Registered Agent) (Date)	<u> </u>
If signing on behalf of an entity: J. H. Hughes Jr. 8-18-	95
(Typed or Printed Name) (Capacity	
CR2E045(3/96)	S(C 0.22-97