85	8047
Law Offices of Robert I. Rub 6360 N.W. 5 Way Suite 303 Ft. Lauderdale, FL 33309	in
City/State/Zip Phone #	
CORPORATION NAME(S) & DOCU	Office Use Only
1(Corporation Name) 2.	(Document #)
(Corporation Name)	(Document #) 7000033716070 -08/24/0001046010
<ul> <li>4</li></ul>	*****35.00 *****35.00
Walk in Pick up time	(Document #)
Mail out Will wait	Photocopy     Certificate of Status
<ul> <li>Profit</li> <li>Not for Profit</li> <li>Limited Liability</li> <li>Domestication</li> <li>Other</li> </ul>	<ul> <li>Amendment</li> <li>Resignation of R.A., Officer/Director</li> <li>Change of Registered Agent</li> <li>Dissolution/Withdrawal</li> <li>Merger</li> </ul>
OTHER FILINGS	<b>REGISTRATION/QUALIFICATION</b>
<ul> <li>Annual Report</li> <li>Fictitious Name</li> </ul>	<ul> <li>Foreign</li> <li>Limited Partnership RA address Chg.</li> <li>Reinstatement</li> <li>Trademark</li> <li>Other 9/27/00</li> </ul>
CR2E031(7/97)	Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 11, 2000

LAW OFFICES OF ROBERT I. RUBIN 6360 N.W. 5 WAY, STE. 303 FT. LAUDERDALE, FL 33309

SUBJECT: FRONTIER INSURANCE COMPANY Ref. Number: 858047

We have received your document for FRONTIER INSURANCE COMPANY and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We can find no record of the entity named in your document. A computer printout of a similar named entity is enclosed for your review. If this is the right name, please correct your document and return it for filing.

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) 487-6909.

Velma Shepard Corporate Specialist

Letter Number: 000A00047828

DIVISION OF CORPORATIONS 00 SEP 25 AM 9: 30 RECEIVED

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE FOR CORPORATIONS

Pursuant to the provisions of section 607.0502(3), 617.0502(3), 607.1508(2), or 617.1508(2), Florida Statutes, the undersigned registered agent of a corporation organized under the laws of the State of  $\underline{MCM}$   $\underline{JOVK}$  submits the following statement in order to change the registered office in Florida.

I. The name of the corporation:

2. The street address of the current registered office:

 $n \cdot W \cdot \Xi$ 30 suderdale

3. The street address of the new registered office:

The corporation has been notified in writing of this change.

The street address of the registered office and the street address of the business office of the registered agent, as changed, will be identical.

Date:

(Signature of Registered Agent)

(Printed or Typed Name)

Filing Fee: \$35.00

Make checks payable to Florida Bepartment of State and mail to: Division of Corporations P.O. Box 6327 Tallabassee, FL 32314

INHS28(9/98)