Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

Fax Number : (561)694-1639

no nec -1 AM 8: 57

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REGISTERED AGENT CHANGE

SUNTRUST INSURANCE SERVICES, INC.

Certificate of Status	0
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of section 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 Georgia in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: SUNTRUST INSURANCE SERVICES, INC.	
2. The principal office address: 303 PEACHTREE CENTER AVE STE 140 ATLANTA GA 30303	_
3. The mailing address (if different):	_
4. Date of incorporation/qualification: 11/21/2000 Document Number: F00000006591	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: LAURIE A PENNINGTON	
200 SOUTH ORANGE AVE 9TH FL MC: (FL-ORLANDO	
ORLANDO FL 32801	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Corporate Creations Network Inc.	
11380 Prosperity Farms Road #221E (P.O. Box Not acceptable)	
Palm Beach Gardens FL 33410	
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) MEHROOB VETI (State Secretification) (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.	
AMMINE SUMONO 12/1/08	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
Samantha Simons, Special Secretary (Typed or Printed Name)	
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32614 CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE SECONDARY OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32614 L CREATER OF CORPORATIONS (P.O. BOX 6327, TALLAHASSEE)	֓֞֞֞֞֜֞֞֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓
Corporate Creations International Inc.	7
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11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410 (561) 694-8107	