F02000005739

(Requestor's Name)		
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PICK-UP	TIAW	MAIL
(Busine	ss Entity Name)	
(Document Number)		
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DIVISION OF CHAPTER

TALLAHASSEE, FL

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CT CORPORATION

May 16, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5851892 SO

Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Southwest Reinsure, Inc (NM) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton Sr. Fulfillment Specialist Jeff_Netherton@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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 New Mexico submits the following statement in order to change its registered office or registered agent, or both in
the State of Florida.
1. The name of the corporation: Southwest Reinsure, Inc.
2. The mailing address of the corporation: 2400 Louisiana Blvd., Ste. 100, Albuquerque, NM 87110
3. Date of incorporation/qualification: 11/18/02 Document number: F2000005739
4. The name and address of the current registered agent and office:
NRAI Services, Inc.
526 E. Park Ave.
Tallahassee, FL 32301
5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable)
C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road,
Plantation, Florida 33324
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.
(Signature of an officer, chairman or vice chairman of the board) (Date)
Brooke E. Holland, Secretary (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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. CT Corporation System By: (Signature of Registered Agent) (Date)
If signing on behalf of an entity: (Typed or Printed Name) A Sistant ECOLUMN (Capacity)

* * * FILING FEE: \$35.00 * * *