## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Corporate Filing Menu

**EXAMINER** 

NOV 02 20 Help

Electronic Filing Menu

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		2, 607.1508, or 617.1508, Florida Statutes,				
		zed under the laws of the State of $\overline{ ext{Delaws}}$	are			
in order	r to change its registered office or registe	red agent, or both, in the State of Florida.				
1. The name of t	he corporation: STONERIVER NATI	ONAL FLOOD SERVICES, INC.				
2. The principal	office address:					
555 Corpor	ate Drive, Kalispell, MT 59901					
	ddress (if different): nnny Slope Road, Suite 110, Brookfi	eld, WI 53005	·			
4. Date of incorporation/qualification: 12/29/2003 Document number: F03000006404						
5. The name and	street address of the current registered ag					
	Pamela Gerald, C/O National Flood Services, Inc.					
455 Fairway Drive, Ste. 102						
•	Deerfield Beach, FL 33441		NOV -			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):						
	Corporation Service Company		92 82 MANGE 184/158			
	1201 Hays Street		, And Comments			
(P.O. Box NOT acceptable)						
	Tallahassee, FL 32301					
The street addre	ss of its registered office and the street a be identical.	address of the business office of its regist	ered agent,			
Such change was authorized by the	is authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by an officer ified in writing of the change.	so			
- Ma	te of an officer or director)	Maureen Cathell, Vice President (Printed or typed name and title)				
of my duties, and document is being corporation has	the appointment as registered agent and o comply with the provisions of all statude I am familiar with and accept the obling filed merely to reflect a change in the been notified in writing of this change.  Son Service Company	l agree to act in this capacity tes relative to the proper and complete p gation of my position as registered agent registered office address, I hereby confi	performance ! Or, if this irm that the			
By:	naturdo Registered Agent)	10/10/2011				
_	· · · · · · · · · · · · · · · · · · ·	(Date)				
If signing on bel	half of an entity:					
Sylvia Queppe	et, Asst. Vice President					
T)	yped or Printed Name)					

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