F05000005369

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: July 24, 2013

Order#: 724222-008

Re: AMERICAN HIGHWAYS INSURANCE AGENCY, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Vera M. Norris

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida organized under the laws of the State of registered agent, or both, in the State of	Ohio	
1. The name of	the corporation: AMERICAN HIGH	WAYS INSURANCE AGENCY, INC.		
2. The principal	office address: 3250 Interstate Dri	ive, Richfield, OH 44286		
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 09/07/2005	Document number: F05000	005369	
	I street address of the current regis rtment of State: (If resigned, enter	tered agent and registered office on file wresigned)	ith the	
	NRAI Services, Inc.			
	1200 South Pine Island Road		2013 SE(
	Plantation, FL 33324		2013 AUG SECRETA ALLAHA	
6. The name and (if changed):	I street address of the new register	ed agent (if changed) and /or registered of	S 20 1	
	Corporation Service Company		2: 5 08/06	
	1201 Hays Street		6	
		tox NOT acceptable	•	
	Tallahassee, FL 32301		-	
The street address changed will	ess of its registered office and the be identical.	street address of the business office of it	ts registered agent,	,
Such change wa authorized by the	as authorized by resolution duly a ne board, or the corporation has be	dopted by its board of directors or by an een notified in writing of the change.	officer so	
	4 2	Dona Priebe, Vice President		
_	re of an officer or director	Printed or typed name and ti	ilė	
I further agree performance of agent. Or, if th hereby confirm	to comply with the provisions of a my duties, and I am familiar with	ent and agree to act in this capacity. Il statutes relative to the proper and contains and accept the obligation of my position to reflect a change in the registered officient in writing of this change.	nplete n as registered ce address, I	
By: Wraca	C-Kinby, nature of Registered Agent	July 12, 2013		
_		Date		
	half of an entity:			
	, Assistant Vice President yped or Printed Name			
	**			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

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

statement of c	hange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida i on organized under the laws of the State of _ or registered agent, or both, in the State of I	Ohio	
	9 0 10	Ç.	rioriaa.	
1. The name of	of the corporation: AMERICAN FIG.	HWAYS INSURANCE AGENCY, INC.		
2. The princip	oal office address: 3250 Interstate D	// Alchield, On 44200		
3. The mailing	g address (if different):			
4. Date of inco	orporation/qualification:09/07/200	Document number: F050000	005369	
5. The name a		istered agent and registered office on file w		
	NRAI Services, Inc.			
	1200 South Pine Island Road		. 75 2	
	Plantation, FL 33324		BI3 AI ECRE	-
6. The name a (if changed)	and street address of the new registe):	ered agent (if changed) and /or registered of	2013 AUG - 1 PH SECRETARY OF S PALLAHASSEE.FL	Ē
	Corporation Service Company		7. CR	
	1201 Hays Street		₹15¢	
		Box NOT acceptable		
	Tallahassee, FL 32301			
The street add as changed w	dress of its registered office and th ill be identical.	e street address of the business office of it	s registered agent	t,
Such change authorized by	was authorized by resolution duly the board, or the corporation has	adopted by its board of directors or by an been notified in writing of the change.	officer so	
	2	Dona Priebe, Vice President		
I hereby acce I further agre performance agent. Or, if hereby confir Corporal	te to comply with the provisions of of my duties, and I am familiar with this document is being filed merely methat the corporation has been notion Service Company	Printed or typed name and total agent and agree to act in this capacity. all statutes relative to the proper and come the and accept the obligation of my position y to reflect a change in the registered office of the difference of this change.		
By: Drac	. C-Kubly Signature of Registered Agent			
	behalf of an entity:			
Grace E. Kirb	oy, Assistant Vice President	_		
	Typed or Printed Name	INC PED, \$25.00 \$ \$ \$		
	* * * #1L1	ING FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314