## F06000000 753

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(Re	questor's Name)	
(Ad	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	<b>⇒</b> #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

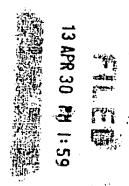
Office Use Only



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04/30/13--01032--001 \*\*10.00

04/30/13--01032--002 \*\*25.00



PA-Change 5-7-13



April 23, 2013

Division of Corporations Florida Department of State Clifton Building P. O. Box 6327 Tallahassee, FL 32314

RE: NAVIGATORS MANAGEMENT COMPANY, INC.

Maidreado

Dear Sir/Madam,

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Corporations on behalf of the above referenced company, along with our check in the amount of \$35.00 to cover the filing fee.

In addition, there is a self-addressed envelope enclosed for your convenience in returning to me a filed stamped copy of the filed document.

Should you require further assistance, please feel free to contact me.

Sincerely,

Diana Maldonado Client Support

Phone: 888.664.6263

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

statement of change is submitted	tions 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this I for a corporation organized under the laws of the State of New York egistered office or registered agent, or both, in the State of Florida.
1. The name of the corporation:	NAVIGATORS MANAGEMENT COMPANY, INC.
2. The principal office address:	6 INTERNATIONAL DRIVE RYE BROOK NY 10573
3. The mailing address (if different	ent):
4. Date of incorporation/qualific	eation: 02/07/2006 Document number: F06000000753
	of the current registered agent and registered office on file with the
CT CORPORA	FION SYSTEM
1200 S. PINE IS	SLAND RD.
PLANTATION	
6. The name and street address (if changed):	of the new registered agent (if changed) and /or registered office
NRAI Services,	Inc. 59
515 East Park A	venue,
Tallahassee, Flo	P.O. Box NOT acceptable orida 32301
The street address of its registe as changed will be identical.	red office and the street address of the business office of its registered agent,
Such change was authorized by authorized by fle board, or the	resolution duly adopted by its board of directors or by an officer so corporation has been notified in writing of the change.
Signature of an officer or dir	Sherry J. Little Vice President
I further agree to comply with to performance of my duties, and	nt as registered agent and agree to act in this capacity. the provisions of all statutes relative to the proper and complete I am familiar with and accept the obligation of my position as registered being filed merely to reflect a change in the registered office address, I ation has been notified in writing of this change.
NRAI Services, Inc.  By Man Malahlac  Signature of Registered.  Diam Malahlac  If signing on behalf of an entity	Agent Asst., Secy.
Diana Madonad Typed or Printed Name	o, Asst, Secy.

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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