F06000001965

(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Priorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
0.45
Certified Copies Certificates of Status
Considering the Filter Office
Special Instructions to Filing Officer:
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200 YV est A dams Street, Suite 2007 Chicago, IL 60606 (312) 346-3606 (800) 934-2556 Fax: (312) 346-3607

April 15, 2008

VIA REGULAR MAIL

Division Of Corporations Florida Department Of State 409 E. Gaines Street Tallahassee, FL 32399

RE: America Direct Insurance Agency, Inc.
Fidelity Life Association, A Legal Reserve Life
Insurance Company

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the forms to change the registered agent/office for the above captioned in your state. Also enclosed is a check for the required fee.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

Norine Nagęl

NN/smc. Encl.

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

		ns 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this a corporation organized under the laws of the State of \square
		tered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation:	America Direct Insurance Agency, Inc.
2. The principal	l office address: 380	0 Golf Road, Suite 350
_Rollling M	leadows, Illinois 6	0008
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification	n: 3/28/06 Document number: F0600001965
	d street address of the rtment of State:	e current registered agent and registered office on file with the
	CT Corporation	in System
	1200 South Pi	ne Island Road
	Plantation, FL	33324
6. The name and (if changed):	d street address of the	e new registered agent (if changed) and /or registered office
	NRAI Service	es, Inc.
	2731 Executi	ive Park Drive, Suite 4
	Weston, FL	(P.O. Box NOT acceptable)
	vveston, r'L	33331
The street address changed will	ess of its registered (be identical.	office and the street address of the business office of its registered agent,
Such change wauthorized by t	as authorized by res he board, or the corp	olution duly adopted by its board of directors or by an officer so coration has been notified in writing of the change.
Mark	ure of an office or director	Mark Wray, Secretary (Printed or typed name and title)
I further agree of my duties, ar document is bei corporation h a	to comply with the paid I am familiar with ing filed merely to rest been notified in with my lervices, Inc.	registered agent and agree to act in this capacity. Provisions of all statutes relative to the proper and complete performance of and accept the obligation of my position as registered agent. Or, if this effect a change in the registered office address, I hereby confirm that the iting of this change.
- / /si	gnature of Registered Agen	1/15/08 (Date)
If signing on be	ehalf of an entity:	
	el, Assistant Sec	pretary
(Typed or Printed Name)	

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