F06000003928

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| (Cit | y/State/Zip/Phone | #) |
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| (Ru | siness Entity Nam | ۵) |
| (Bu | Siless Littly Nam | e) |
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| (Do | cument Number) | |
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| Certified Copies | _ Certificates | of Status |
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| Special Instructions to | Filing Officer: | |
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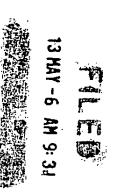


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5-10-13



COVER LETTER

| Division of Corporations |
|--|
| SUBJECT: Palm Harbor Insurance Agency of Texas, Inc. |
| Name of Corporation F060000003928 |
| DOCUMENT NUMBER: F060000003928 |
| The enclosed Affidavit by Foreign Corporation to Change/Add Officer(s) and/or Director(s) and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Lori A. Daily |
| Name of Contact Person |
| Cavco Industries, Inc. |
| Firm/Company |
| 1001 N. Central Ave., Suite 800 Address |
| |
| Phoenix, AZ 85004 |
| City/State and Zip Code lori.daily@cavco.com E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Lori A. Daily Name of Contact Person at (602) 283-9215 Area Code & Daytime Telephone Number |
| Name of Contact Person Area Code & Daytime Telephone Number |
| Enclosed is a check made payable to the Florida Department of State for the following amount: |
| \$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certificate Of Status \$43.75 Filing Fee & Certificate Of Status & Certificate Of Status & Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certificate Of Status & Certified Copy (Additional copy is enclosed) |
| Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301 |



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

(Note: Applicable only during the first calendar year of qualification)

| (Note: Applicable | e only during the tirst calendar year of qualification) |
|---|---|
| The name of the foreign corpor Palm Harbor Insurance | ation as it appears on the records of the Florida Department of State is: Agency of Texas, inc. |
| 2. This entity was authorized to transmission number is F0639280000 | ansact business in Florida on 06-05-06 and its Florida document |
| 3. This corporation was formed un | der the laws of Texas |
| 4. The name and address of each of | officer and/or director is as follows: |
| <u>Title:</u> Secretary | Name and Address David Marshall |
| | 100 Northwoods Drive |
| | New Braunfels, TX 78132 |
| CPT | Ryan Gavin 15301 Spectrum Drives addison, TX 75001 |
| VCVP | William A. Kotylo 100 Northwoods Drive New Braunfels, TX 781321 |
| | · · · · · · · · · · · · · · · · · · · |
| (Att | ach additional pages if necessary) |
| Cliphon | President |
| nature of an officer or director | Title of person signing |
| d or printed name of person signing | FILING FEE \$35 |
| , | Make checks payable to Florida Department of State and Mail to: Division of Corporations PO Box 6327 Tallahassee, FL 32314 |