

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000261061 3)))



H090002610613ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

RE-SUBMIT

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

Please retain original filing
date of submission 12/18/09

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
COMPASS CONSULTING AND BENEFITS, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	045
Estimated Charge	\$35.00

2009 DEC 18 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



December 18, 2009

FLORIDA DEPARTMENT OF STATE

COMPASS CONSULTING AND BENEFITS, INC.
PO BOX 10566
MAILCODE: AL BI CH ACT
BIRMINGHAM, AL 35296

SUBJECT: COMPASS CONSULTING AND BENEFITS, INC.
REF: F06000004145

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

PLEASE CORRECT THE DATE OF FILING OF THE AMENDMENT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

FAX Aud. #: E09000261061
Letter Number: 109A00038569

2009 DEC 21 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Compass Consulting and Benefits, Inc.
Name of Corporation

DOCUMENT NUMBER: F06000004145

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert Crowe

Name of Contact Person

Compass Bank

Firm/Company

P.O. Box 10566 Mailcode AL BI CH ACT

Address

Birmingham, AL 35296

City/State and Zip Code

matthew.tonne@bbvacompass.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Crowe

Name of Contact Person

at (205) 297-5498

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:



\$35.00 Filing Fee



\$43.75 Filing Fee &
Certificate of Status



\$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)



\$52.50 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is
enclosed)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F06000004145

(Document number of corporation (if known))

1. Compass Consulting and Benefits, Inc.
(Name of corporation as it appears on the records of the Department of State)
2. Texas 3. 06/14/2006
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 5/15/09

5. BBVA Compass Consulting and Benefits, Inc.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Kirk Pressley
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Kirk Pressley

(Typed or printed name of person signing)

Treasurer

(Title of person signing)

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Hope Andrade
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that on May 15, 2009, Compass Consulting and Benefits, Inc., a Domestic For-Profit Corporation (file number 800655938), changed its name to BBVA Compass Consulting and Benefits, Inc..

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 16, 2009.



A handwritten signature in cursive script, appearing to read "Hope Andrade".

Hope Andrade
Secretary of State