Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE ACCESS, INC.

Account Number : FCA000000011 Phone : (850)222-2666

Fax Number : (850)222-1666

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

Email Address:

REGISTERED AGENT CHANGE MGT PROPERTY & CASUALTY, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
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Electronic Filing Menu Corporate Filing Menu

Help

9/1/2010

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

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florid inge is submitted for a corporation organised under the laws of the State of ir to change its registered office or registered agent, or both, in the State of | GEC | DRGIA | | |
|--|---|------------------------------|--------------------------------------|----------------------------|---|
| 1. The name of t | the corporation: MGT PROPERTY & CASUALTY, INC. office address: 300 WILSON ROAD, BUILDING 300, GRIFFIN | | | | |
| 3. The mailing a | ddress (if different): | | | | |
| 4. Date of incorp | poration/qualification: 10/03/2006 Document number: | F060 | 000063 | 05 | |
| | I street address of the current registered agent and registered office on file v truent of State: (If resigned, enter resigned) | vith the | 0 | | |
| | CT CORPORATION SYSTEM | | | | |
| | 1200 SOUTH PINE ISLAND ROAD | | | | |
| | ANTATION FL 33324 US | | A | 201 | |
| 6. The name and (if changed): | street address of the new registered agent (if changed) and /or registered o | ffice | CRETAR LAHASS | 2010 SEP - i | |
| | PARACORP INCORPORATED | | H _C | | Ė |
| | 236 EAST 6TH AVENUE | | FS | AM III: O | (|
| | P.O. Box: NOT secopable | _ | SE | :0 | |
| | TALLAHASSEE, FL 32303 | | | | |
| | as of its registered office and the street address of the business office of be identical. | | | geni, | |
| | as authorized by resolution duly adopted by its board of directors or by a the board, or the corporation has been notified in writing of the change. | | | | |
| | William H. Cooper, Sec | | | | r |
| I hereby accept I further agree t of my duties, an document is ben corporation has | the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and of all am familiar with and accept the obligation of my position as register by filed merely to reflect a change in the registered office address, I her been notified in writing of this change. | ompleti red agi eby čo | e perform ont. Or, i nfirm tha | iance if this it the | |
| 761 | 9/1/2010 | | | | |
| | ASST SECRETARY, PARACORP INCORPORATED half of an entity: | | | | |
| | ORP INCORPORATED | | | | |
| • | * * * FILING FEE: \$35.00 * * * | | | | |

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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, F1. 32314

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