Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 : (850)521-1000 Fax Number : (850)558-1515

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

JEN@THEBESTIRS.COM Email Address:_

10 MAR 18

REGISTERED AGENT CHANGE INSURANCE RECRUITING SPECIALISTS INC.

Certificate of Status	0
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Page Count	02
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH $\dot{}$ FOR CORPORATIONS

statement of char	provisions of sections 607.0502, 617.0502, nge is submitted for a corporation organiz to change its registered office or register	ed under the laws of the	State of Ar	izona		
1. The name of th	ne corporation: INSURANCE RECRU	ITING SPECIALIST	S INC.			
2. The principal of						
	ave Creek Road, Suite 200, Phoenix,	AZ 85032				
4. Date of incorp	oration/qualification: 12/20/2006	Document number:	F0600000	7797		
	street address of the current registered age					
·	C T Corporation System					
	1200 South Pine Island Road					
	Plantation, FL 33324			SE	2010	
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or regi	istered office	SE	2010 MAR 18	T
	Corporation Service Company		· · · · · · · · · · · · · · · · · · ·	733 Y 05	P X	П
	1201 Hays Street			FLO	?	(_
	(P.O. Box NOT acceptable)			RE SE	SU CU	
	Tallahassee, FL 32301			Tr.	-	
The street addre	ss of its registered office and the street a be identical.	ddress of the business of	office of its re	egistered	agent,	
Such change wa authorized by th	s authorized by resolution duly adopted to board, or the corporation has been not	by its board of directors ified in writing of the cl	s or by an of hange.	ficer so		
Bla	nea Lynder	Blanca Lozada, Atto	rney in Fac			
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment as registered agent and o comply with the provisions of all statu d I am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change. on Service Company	agree to act in this cap tes relative to the prope ation of my position as	pacity. er and comple registered a	ete perfoi gent. Or	rmance , if this nat the	
By: -the	Old	03/16/2010	ata)			
,,,,	maints of Registered Agent) half of an entity:	(1);	ate)			
0 0	Dawson, Asst. Vice President					
	yped or Printed Namo)					

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

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

CRZE045 (8/05)