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SECRETARY OF STATE
ALLAHASSEE F. STATE

RA Change OULLIETTE

FEB 23 2009

EXAMINER



ACCOUNT NO. : 072100000032

REFERENCE : 882190 7688182

AUTHORIZATION

COST LIMIT

ORDER DATE: February 4, 2009

ORDER TIME : 9:20 AM

ORDER NO. : 882190-015

CUSTOMER NO: 7688182

CHANGE OF AGENT

NAME: BUILDERS & TRADESMEN'S INSURANCE SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd

EXAMINER'S INITIALS:

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

statement of cha	nge is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida t tion organized under the laws of the State of _ e or registered agent, or both, in the State of I	California
1. The name of t	the corporation: BUILDER	S & TRADESMEN'S INSURANC	CE SERVICES, INC
2. The principal 6610 Sier	office address:	Rocklin, CA 95677	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification; 04/05	/2007 Document number: F0700	00001863
	I street address of the current returnent of State:	egistered agent and registered office on file wi	th the
	John D. Hatch		
1267 Berkshire Lane, Suite 200			
	Tarpon Springs, FL 3	4688	O9F SECF
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered of		FEB 23 CRETARY AHASSE
	Corporation Service C	Company	
	1201 Hays Street		
	(P.O. Box NOT acceptable)		
	Tallahassee, FL 32301		_
The street addre as changed will	ess of its registered office and be identical.	the street address of the business office of i	ts registered agent,
Such change wa authorized by th	as authorized by resolution du ne board, or the corporation ha	aly adopted by its board of directors or by an as been notified in writing of the change.	officer so
Maureen Cullen, Attorney in factoring (Printed or typed name and title)			•
of my duties, and document is bei corporation has By: (Signal my duties, and document is bei corporation has given by: (Signal my duties, and ducument is being corporation.	the appointment as registered to comply with the provisions of I am familiar with and accept to reflect a character of the I am familiar with and accept to reflect a character of the I am Service Company of the I am Service Company of Registered Agent)	d agent and agree to act in this capacity, of all statutes relative to the proper and corpt the obligation of my position as registere ange in the registered office address, I here is change. 2/19/09 (Date)	nnlete performance
Michelle R.	Vannoy, Assistant VP		
	Syned or Printed Name)		

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

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