

F070000002324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

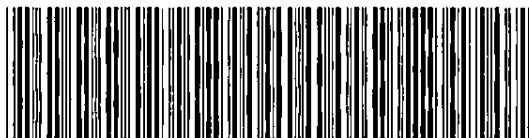
(Document Number)

Certified Copies _____

Certificates of Status _____

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14:02

SEP 5 2023

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Peterson McGregor & Associates, Inc.

Name of Corporation

DOCUMENT NUMBER: F07000002324

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deanna Stanley

Name of Contact Person

Kennedy Licensing Service, Inc.

Firm/Company

1600 East Pioneer Pkwy., Suite 340

Address

Arlington, TX 76010

City/State and Zip Code

dstanley@kennedylicensing.com

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

For further information concerning this matter, please call:

Deanna Stanley

Name of Contact Person

at (214) 855-0737

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECTION 1
(1-3 MUST BE COMPLETED)

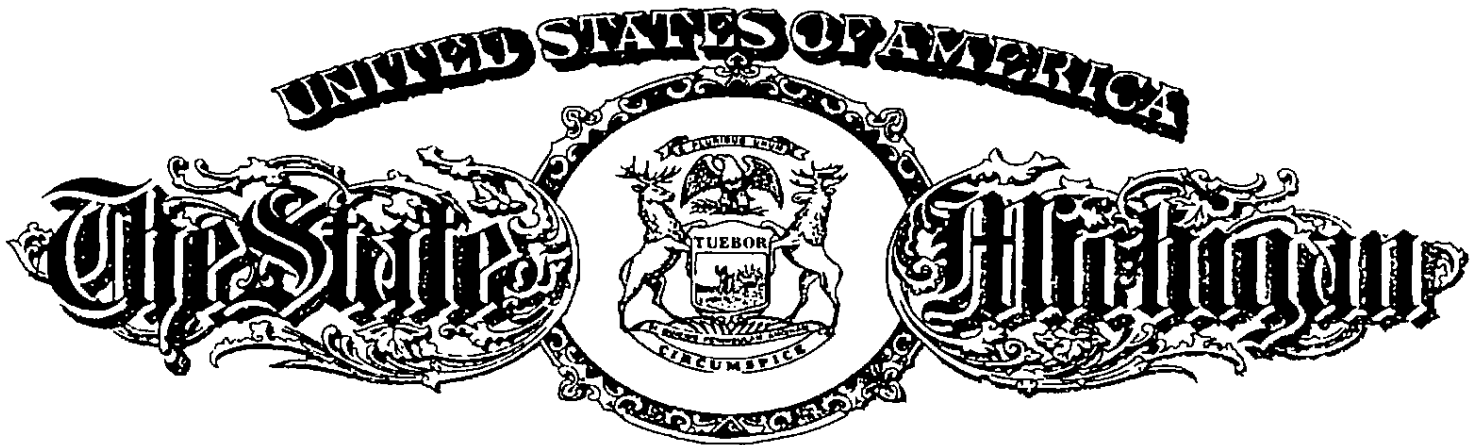
(Document number of corporation (if known))

(Name of corporation as it appears on the records of the Department of State)

3 4/30/2007

(Date authorized to do business in Florida)

Signature of New Registered Agent, if changing



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

HIGHSTREET INSURANCE SERVICES GREAT LAKES INC.

*was validly incorporated on May 24 , 2002 as a Michigan DOMESTIC PROFIT CORPORATION,
and said corporation is validly in existence under the laws of this state.*

*This certificate is issued pursuant to the provisions of 1972 PA 284 to attest to the fact that the corporation
is in good standing in Michigan as of this date and is duly authorized to transact business and for no other
purpose.*

*This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit
given it in every court and office within the United States.*



Sent by electronic transmission

Certificate Number: 23080685202

*In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 30th day of August , 2023.*

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau

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Tallahassee, FL 32303

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)

07000002324

(Document number of corporation (if known))

1. Peterson McGregor & Associates, Inc.

(Name of corporation as it appears on the records of the Department of State)

2. Michigan

(Incorporated under laws of)

3. 4/30/2007

(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? 8/16/2023

5. Highstreet Insurance Services Great Lakes 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. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

9. If the amendment changes person, title or capacity in accordance with 607.3504 (4), indicate that change

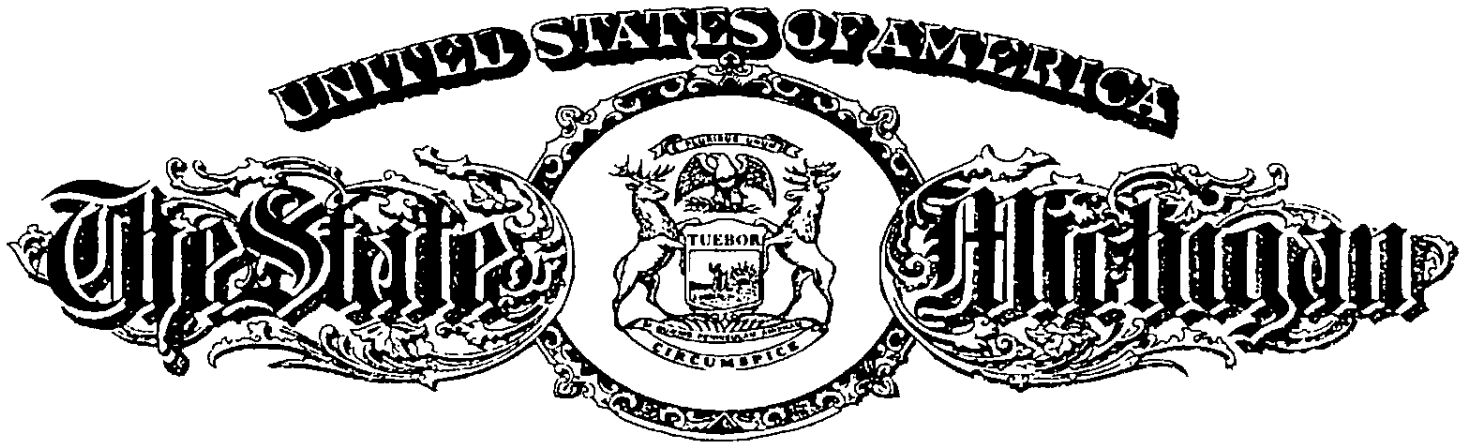
Title/Capacity	Name	Address	Type of Action
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
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			☐ Remove
			☐ Add
			☐ Remove

10. 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.

Dennis Muth
 (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)
Dennis Muth (Typed or printed name of person signing)

President
 (Title of person signing)

FILING FEE \$35.00



Department of Licensing and Regulatory Affairs

Lansing, Michigan

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