F01000002424

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



100249994751

07/26/13--01020--002 **35.00

13 JUL 26 PH 12: 42

SECRETARY OF STATE TALLAHASSEE FLORIDA

JC7/29



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: July 24, 2013

Order#: 724222-094

Re: NATIONAL INTERSTATE INSURANCE AGENCY, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Vera M. Norris c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	provisions of sections 607.0502, 617.0502 nge is submitted for a corporation organiz r to change its registered office or register		this 	_
1. The name of t	he corporation: NATIONAL INTERSTATE	EINSURANCE AGENCY, INC.		
2. The principal	office address: 3250 Interstate Drive, Rich	nfield, OH 44286		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 05/04/2007	Document number: F07000002424		
	street address of the current registered ag tment of State: (If resigned, enter resigned			
	NRAI Services, Inc.			
	1200 South Pine Island Road			
	Plantation, FL 33324			Ţs
6. The name and (if changed):	I street address of the new registered agent	t (if changed) and /or registered office	13 JUL 26	ECRETAR LLAHASS
	Corporation Service Company			
	1201 Hays Street		PH 12: 42	
	P.O. Box NOT acceptable Tallahassee, FL 32301			AIE
The street addreas changed will	ess of its registered office and the street a be identical.	ddress of the business office of its registe	ered age	ent,
Such change wa authorized by the	as authorized by resolution duly adopted the board, or the corporation has been not	by its board of directors or by an officer street in writing of the change.	so	
(Jc	K 2_	Dona Priebe, Vice President		
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and the appointment as registered agent and to comply with the provisions of all statument with and active deciment is being filed merely to reflect that the corporation has been notified in Service Company	Printed or typed name and title agree to act in this capacity tes relative to the proper and complete cept the obligation of my position as reg ct a change in the registered office addre writing of this change.	istered ess, I	
By: Wrace		July 12, 2013		
	nature of Registered Agent half of an entity:	Date		
	Assistant Vice President			
	yped or Printed Name			
	* * * FILING FEE	E: \$35.00 * * *		

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