(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City)	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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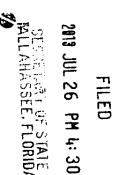
Office Use Only



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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#: 724222-156

Re: TRIUMPHE CASUALTY COMPANY

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	nge is submitted for a corporation orga	92, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of Ohio tered agent, or both, in the State of Florida.
	the corporation: TRIUMPHE CASUALTY	
	office address: 3250 Interstate Drive, R	
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 05/15/2007	Document number: F07000002576
	I street address of the current registered attended to the current of State: (If resigned, enter resign	agent and registered office on file with the ed)
	NRAI Services, Inc.	
	1200 South Pine Island Road	FILE PL 26
	Plantation, FL 33324	PH PH
6. The name and (if changed):	l street address of the new registered age	FILED FILED STEE, FLORIDA and /or registered offined and /or registered off
	Corporation Service Company	
	1201 Hays Street	
	P.O. Box NO	T acceptable
	Tallahassee, FL 32301	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been no	d by its board of directors or by an officer so otified in writing of the change.
(Je	<del>K</del> 2_	Dona Priebe, Vice President
I hereby accept I further agree i performance of agent. Or, if th hereby confirm Corporatio	my duties, and I am familiar with and a is document is being filed merely to refithat the corporation has been notified in Service Company	Printed or typed name and title and agree to act in this capacity. Suites relative to the proper and complete accept the obligation of my position as registered lect a change in the registered office address, I in writing of this change.  July 12, 2013
Sig	LKNOL nature of Registered Agent	Date
If signing on be	half of an entity:	
Grace E. Kirby,	Assistant Vice President	
T	yped or Printed Name	
	* * * FILING FE	EE: \$35.00 * * *

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