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Special Instructions to	Filing Officer:	ļ		

Office Use Only



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S. YOUNG



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Soraya Sariaslani soraya.sariaslani@csclgobal.com

Date: September 17, 2019

Order#: 873453-180

Re: ONPOINT UNDERWRITING, 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 tollowing:

Attn: Soraya Sariaslani c/o Corporation Service Company

251 Little Falls Drive 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

•	•	.0502, 617.0502, 607.1508, or 6 poration organized under the la		_	İS	
•		office or registered agent, or bo	· · · · ·		_	
1. The name of t	he corporation: ONPOINT	UNDERWRITING, INC.				
		hauncy Lane Suite 235 Phoeni	x, AZ 85054			
<del></del>						
3. The mailing a	ddress (if different): 220 S	S. Ridgewood Ave. Daytona Be	ach, FL 32114			
4. Date of incorporation/qualification: 05/25/2007 Document number: F0700000				2788		
	street address of the curre timent of State: (If resigner	ent registered agent and register d. enter resigned)	ed office on file with	i the		
	C T CORPORATION SY	STEM		<u> </u>	8,1	
	1200 SOUTH PINE ISLA	ND ROAD		im ( <u>-</u> 2≱ / 50 +	V:T	
	PLANTATION, FL 33324				с: :-	
6. The name and (if changed):	street address of the new	registered agent (if changed) ar	nd /or registered offic		47 站 民	
	Corporation Service Con	npany		) <del>-</del>	ंद	
	1201 Hays Street					
PO Box NOT acceptable						
	Tallahassee	FL -	32301			
The street addre as changed will	ss of its registered office be identical.	and the street address of the bu	isiness office of its r	egistered	agei	
authorized by th	e board, or the corporatio	nduly adopted by its board of con has been notified in writing o	directors or by an off of the change.	ficer so		
)	e of an officer or director	Jill Cilmi, Vice I	President			
Signatin	e of an officer or director	Print	ed or typed name and title			
I further agree to performance of agent. Or, if thi hereby confirm to	o comply with the provisi my duties, and I am famil s document is being filed	ered agent and agree to act in ons of all statutes relative to the iar with and accept the obligate merely to reflect a change in to been notified in writing of this contains.	he proper and compl tion of my position a he registered office a	ete 8 register address, 1	red I	
By: May	ature of Registered Agent	09/16/2019				
Sign	nature of Registered Agent		Date			
If signing on bel	nalf of an entity:					
	Assistant Vice President					
Ty	ped or Printed Name					

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