F07000003832

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(Re	equestor's Name)	
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R.A. Charge

AUG 21 2009

EXAMINER



PORATION SERVICE COMPANY.

ACCOUNT NO. : I2000000195

REFERENCE: 093226 7408659

AUTHORIZATION :

COST LIMIT

ORDER DATE: August 11, 2009

ORDER TIME : 9:17 AM

ORDER NO. : 093226-212

CUSTOMER NO: 7408659

CHANGE OF AGENT

NAME:

FRANEY MUHA ALLIANT INSURANCE

SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman

EXAMINER'S INITIALS: _____

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

The name of the corporation: FRANEY MUHA ALLIANT INSURANCE SERVICES, INC. The principal office address: 9901 Business Parkway, Suite B, Lanham, MD 20706	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 07/30/2007 Document number: F07000003832	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
NRAI Services, Inc.	
2731 Executive Park Drive, Suite 4	
Weston, FL 33331 8 75	
Weston, FL 33331 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Corporation Service Company 1201 Hays Street	
Corporation Service Company	
1201 Hays Street	
(P.O. Box NOT acceptable)	
Tallahassee, FL 32301	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
Maureen Cullen, Attorney in fact	
(Signature of an officer or director) I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. Corporation Service Company	
By: Compared Agent August 18, 2009 (Date)	
If signing on behalf of an entity:	
Michelle R. Vannoy, Asst. VP	
(Typed or Printed Name) * * * FILING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)