

FD700DDDD5244

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

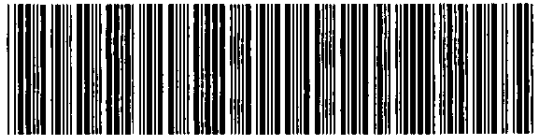
(Business Entity Name)

(Document Number)

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02/08/10--01058--005 \*\*35.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 FEB -8 AM 11:59

RA/RD/chs  
@ 2/9/10

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TAS Insurance Group, Inc.  
(Name of Alien Business Organization)

Dear Sir or Madam:

The enclosed Statement of Change of Registered Agent/Registered Office for Alien Business Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brenda Anthony

(Name of Person)

Central Licensing Bureau

(Firm/Company)

1501 N University, Suite 550

(Address)

Little Rock, AR 72207

(City/State and Zip Code)

For further information concerning this matter, please call:

Brenda Anthony

(Name of Person)

at ( 501 )

664-8044

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR  
REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION**

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO CHANGE ITS REGISTERED OFFICE AND/OR REGISTERED AGENT:

1. TAS Insurance Group, Inc.  
(Name of alien business organization)
2. 10/19/2007 3. F07000005244 4. 43-1807622  
(Florida registration date) (Florida document number) (FEI Number, if applicable)
5. 255 NW Blue Parkway, Suite 102; Lee's Summit, MO 64063  
(Principal office address)

6. Name and address of registered agent and office currently on record with this office:

CT Corporation System

1200 South Pine Island Road

Plantation, FL 33324

7. New registered agent and/or office address:

NRAI Services, Inc.

2731 Executive Park Drive, Suite 4

Weston, FL 33331

(Note: Registered office must be a Florida street address)

8. The street address of the registered office and the street address of the business office of the registered agent are identical.
9. Such change was authorized by the board of directors or an officer of the corporation so authorized by the board of directors.

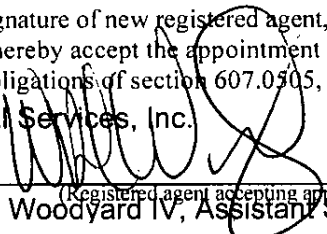
10.   
(Signature of chairman, vice chairman, or officer)

11. Tad DeOrio, President/Director  
(Name and capacity of person signing in number 10 above)

12. Signature of new registered agent, if applicable:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.

NRAI Services, Inc.

by:   
(Registered agent accepting appointment)

WHL Woodyard IV, Assistant Secretary

1/25/2010  
(Date)

**FILING FEE: \$35.00**

**Make checks payable to Florida Department of State and mail to:  
Division of Corporations P. O. Box 6327 - Tallahassee, FL 32314**

FILED  
STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA  
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