

F08000001149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

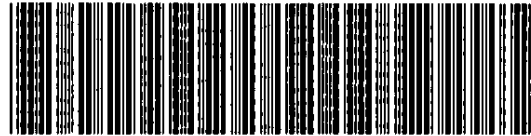
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**NRAI  
CORPORATE  
SERVICES**  
An NRAI Solutions Company

## FILING REQUEST

June 15, 2010

FLORIDA DEPARTMENT OF STATE

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<i>Type of Filing:</i>	CHANGE OF AGENT
<i>Subject(s):</i>	EQUITY PARTNERS INSURANCE SERVICES, INC.
<i>Form(s) Enclosed:</i>	STATEMENT OF CHANGE OF REGISTERED OFFICE / AGENT
<i>Supporting Document(s):</i>	NONE
<i>Check Enclosed:</i>	YES - CHECK# 34414 FOR \$35.00
<i>Return Via:</i>	REGULAR MAIL - SASE ATTACHED
<i>Filing Method:</i>	ASAP

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PLEASE RETURN TO: NRAI CORPORATE SERVICES, INC.  
590 PARK STREET, SUITE 6  
ST. PAUL, MN 55103

Please call me at **1-800-227-1256** if there are any questions.

Thank you!

**Melissa Hobbs**



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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Louisiana in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Equity Partners Insurance Services, Inc.
2. The principal office address: 34641 Grantham College Drive, Suite 3  
Slidell, LA 70460
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 03/14/2008 Document number: F08000001149

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

John D. Hatch Esq

1267 Berkshire Lane, Suite 200

Tarpon Springs, FL 34688

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.

2731 Executive Park Drive, Suite 4

(P.O. Box NOT acceptable)

Weston, FL 33331

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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.

D. F.

(Signature of an officer or director)

Brian Silva, President

(Printed or typed name and title)

*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.*

Melissa Hobbs

(Signature of Registered Agent)

6/11/10

(Date)

If signing on behalf of an entity:

Melissa Hobbs, Assistant Secretary

(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)