

5/9/2016

**F09000004798**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H16000114640 3)))



H160001146403ABCX

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850)617-6380

From: Account Name : BUSINESS FILINGS  
Account Number : 105256001620  
Phone : (608)827-5300  
Fax Number : (608)827-5501

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 MAY -9 AM 9:04

FILED

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**REGISTERED AGENT CHANGE  
DBS INSURANCE AGENCY, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

MAY 10 2016  
C. CARROTHERS

### Power of Attorney

NOTICE IS HEREBY GIVEN THAT ~~Diversified Brokerage Services, Inc.~~, a corporation incorporated under the laws of Minnesota does hereby appoint Brenna Lutter, Mary Jo Spalinger, Tim Jensen (but only for so long as each of them, respectively, remains an employee of BizFilings or an affiliate thereof) as attorney-in-fact for the Corporation to act for the Corporation and affiliates and subsidiaries of the Corporation attached hereto as Exhibit A, specifically incorporated herein by reference ("the Subsidiaries") in the Corporation's and Subsidiaries' names for the limited purposes authorized herein.

The Corporation and the subsidiary entities listed, having taken all necessary steps to authorize the changes, hereby grants its attorney-in-fact the power to execute documents necessary to file annual reports, change entities' registered agent and registered office or equivalent documents necessary to be filed in any state, as directed and authorized by the Corporation.

In the Execution of any documents necessary for the sole, limited purpose, set forth herein, Brenna Lutter, Mary Jo Spalinger, Tim Jensen shall exercise the power of Vice President, Secretary.

This Power of Attorney expires when revoked by the Corporation or Subsidiaries.

IN WITNESS WHEREOF the undersigned have executed this Power of Attorney on the 2<sup>nd</sup> (day) of MAY (month), 2016 (year).

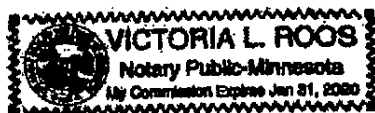
Diversified Brokerage Services, Inc.  
A Minnesota Corporation

By: [Signature]  
Name: NANCY S. DUNIVAN  
Title: SECRETARY / TREASURER

Sworn to and subscribed before me this 2<sup>nd</sup> (day) of May (month), 2016 (year).

[Signature]  
Notary Public, State of MN

Commission Expires: 31<sup>st</sup> (day) of January (month), 2020 (year).



Fax Audit H116000114640 3

## 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 Minnesota \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DBS INSURANCE AGENCY, INC.
2. The principal office address: 5501 Excelsior Blvd., Saint Louis Park, Minnesota 55416-5153
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 12/3/2009 Document number: F09000004798
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

HATCH, JOHN DESQ1267 BERKSHIRE LANE, SUITE 200TARPON SPRINGS FL 34688

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

Business Filings Incorporated1200 South Pine Island RoadP.O. Box NOT acceptablePlantation, Florida 33324

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.

Brenna Lutter  
Signature of an officer or director

Brenna Lutter, Secretary  
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.

Mark  
Signature of Registered Agent

6th day of May, 2016  
Date

If signing on behalf of an entity:

Mark Williams, AVP

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 (03/12)

Fax Audit H116000114640 3

2016 MAY -9 AM 9:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED