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(Ad	dress)			
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(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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JUN 15 2017 R. WHITE



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: June 8, 2017

Order#: 670966-010

Re: AIM ASSOCIATION INSURANCE MANAGEMENT, 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 following:

Attn: Ashley Jiminez

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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.

OUCA.XCOA

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

statement of cha in orde	nge is submitted for a corporation of r to change its registered office or re	.0502, 607.1508, or 617.1508, Florida Statute rganized under the laws of the State of TEXA egistered agent, or both, in the State of Florida	s	
1. The name of t	he corporation: AIM ASSOCIATION	INSURANCE MANAGEMENT, INC.		
2. The principal 8144 WALN	office address: UT HILL LANE, DALLAS TX 75231		, , , , , , , , , , , , , , , , , , , ,	
3. The mailing a	ddress (if different): P.O. BOX 7429	946, DALLAS, TX 75374		
4. Date of incorp	of incorporation/qualification: 03/16/2010 Document number: F10000001319			
	street address of the current register tment of State: (If resigned, enter res	red agent and registered office on file with the signed)		
	REGISTERED AGENT SOLUTION	NS, INC.		
	155 OFFICE PLAZA DR., STE A			
	TALLAHASSEE	FL 32301	## 7 J	
TALLAHASSEE FL 32301 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Corporation Service Company		် (ည	
	1201 Hays Street			
	Tallahassee	NOT acceptable FL 32301		
The street addre	ess of its registered office and the str be identical.	reet address of the business office of its regis	stered agent,	
Such change wa authorized by th	is authorized by resolution duly ado be board, or the corporation has been	pted by its board of directors or by an officent notified in writing of the change.	r so	
	. E. Wome	Jill Cilmi, Vice President Printed or typed name and title	<u></u>	
I hereby accept I further agree is performance of agent. Or, if the hereby confirm	my duties, and I am familiar with a	-1	gistered ress, I	
By:	co CKUDI	06/07/2017		
If signing on be	half of an entity:	Date		
	, Asst. Vice President			
	ped or Printed Name			

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

7.