F10000003149

(Requestor's Name)

(Address)

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(Business Entity Name)

(Document Number)

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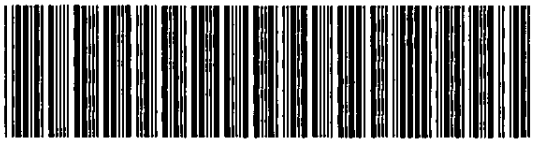

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DATE: **11/9/12**

NAME: THE BENEFIT PLANNING GROUP OF NORTH CAROLINA, INC

TYPE OF FILING: **CHANGE OF AGENT**

COST: **35.00**

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ACCOUNT: **FCA000000015**

AUTHORIZATION: **ABBIE/PAUL/HODGE**

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 North Carolina *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: THE BENEFIT PLANNING GROUP OF NORTH CAROLINA, INC.

2. The principal office address:
3400 Croasdaile Dr Ste 206 Durham NC 27705

3. The mailing address (if different):

4. Date of incorporation/qualification: July 12, 2010 Document number: F10000003149

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)

HIQ CORPORATE SERVICES
1574 VILLAGE SQUARE BLVD, SUITE 100
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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

National Corporate Research, Ltd., Inc.
155 Office Plaza Drive
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.

Signature of an officer or director

Michael C. Waters
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.

Signature of Registered Agent

11/9/2012
Date

If signing on behalf of an entity:
Lucy Rose
, 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 (03/12)