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COVER LETTER

TO:	Amendment Section Division of Corporations				
SUBJI	Portal Insurance Agency, Inc.				
SCEO.	Name of Corporation				
DOCU	F10000005096 MENT NUMBER:				
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please	return all correspondence concerning this matter to the following:				
	Elizabeth A. Harker				
Name of Contact Person					
	3H Agent Services, Inc.				
Firm/Company					
6 Clement Avenue					
	Address				
Saratoga Springs, NY 12866					
	City/State and Zip Code				
beth.harker@3has.com					
	E-mail address: (to be used for future annual report notification)				
For fu	ther information concerning this matter, please call:				
Eliza	peth A. Harker 518 583-0639				
•	Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of State.					
	Mailing Address: Amendment SectionStreet Address: Amendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301				

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

statement of cha	provisions of sections 607.0502, 617.0502 nge is submitted for a corporation organi: r to change its registered office or register	zed under the laws of the State of	Delaware	
1. The name of t	he corporation: Portal Insurance Age	ency, Inc.		
2. The principal	office address: 1277 Treat Blvd., Sui	ite 650		
	Walnut Creek, CA 9459			
3. The mailing a	ddress (if different): 9255 Indian Cree	k Parkway, Suite 700		
	Overland Park, KS			
4. Date of incorp	poration/qualification: 11/19/2010	Document number: F1000	0005096	
5. The name and	I street address of the current registered ag tment of State: (If resigned, enter resigned	-	vith the	
	3H Agent Services. Inc.			
	1970 Otter Way		_	
	Palm Harbor, FL 34685		- -	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	3H Agent Services, Inc.	A. S.		
	1415 Panther Lane, Suite 327	SM M C	- T	
	P.O. Box NOT a	$I = O_{\mathcal{F}}$		
	Naples, FL 34109	ORDE	- ₩ -	
The street addre	ess of its registered office and the street a be identical.	ddress of the business office of i	ts registered agent,	
Such change wa authorized by th	is authorized by resolution duly adopted to board, or the corporation has been notified.	by its board of directors or by an ified in writing of the change.	officer so	
Krbory (re of aft officer or director	Elizabeth Harker, Attorney		
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent and to comply with the provisions of all statu my duties, and I am familiar with and ac is document is being filed merely to refle that the corporation has been notified in	agree to act in this capacity, tes relative to the proper and con cept the obligation of my positio ct a change in the registered offi writing of this change.	mplete n as registered ce address, I	
9AA-	m L	05/06/2014		
Sign	nature of Registered Agent	Date		
If signing on bel	half of an entity:			
Elizabeth Ha	rker			

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