F130000618

(Rec	questor's Name)	<u> </u>
(Adc	tress)	
(Adc	lress)	
(City	//State/Zip/Phon	e #)
		MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	1
Certified Copies	Certificate	s of Status
Special Instructions to F	Filing Officer:	
	Office Use Or	ıly



09/23/13--01007--003 **35.00







BILL WOODYARD President

- 2

Central Licensing Bureau, Inc. 1501 NORTH UNIVERSITY SUITE 550 LITTLE ROCK, ARKANSAS 72207-5271 www.centrallicensingbureau.com (501) 664-8044 FAX - (501) 664-6182

September 19, 2013

Division of Corporations Amendment Section P.O. Box 6327 Tallahassee, FL 32314

Dear Sir/Madam:

Enclosed please find the necessary documents to change the officers of Howden Insurance Services, Inc. (Doc ID# F16300000618).

I trust this letter and the enclosed document and fee are in compliance with your state statutes. If any further action is required, please do not hesitate to contact me.

Thank you for your consideration in this filing.

Sincerely,

Porenda Antho Brenda Anthony

Corporate Qualification Division

/bsa

Enclosures

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Howden Insurance Services, Inc.

Name of Corporation

DOCUMENT NUMBER: F1300000618

The enclosed Affidavit by Foreign Corporation to Change/Add Officer(s) and/or Director(s) and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brenda Anthony

Name of Contact Person

Central Licensing Bureau

Firm/Company

1501 N University, Suite 550

Address

Little Rock, AR 72207

City/State and Zip Code

dreed@centrallicensingbureau.comn

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brenda Anthony	ai (·	₎ 664-8044
Name of Contact Person	Area Code 8	¿ Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for the following amount:

S35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status

\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E127 (10/11)



FILED 13 SEP 23 PH 2:09 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

- 1. The name of the foreign corporation as it appears on the records of the Florida Department of State is: Howden Insurance Services I_{M}
- 2. This entity was authorized to transact business in Florida on <u>02/08/2013</u> and its Florida document number is F13000000618
- 3. This corporation was formed under the laws of <u>New Jersey</u>
- 4. The name and address of each officer and/or director is as follows:

Title:

Name and Address

Please See Attached.

(Attach additional pages if necessary)

nature of an officer or director

Karen M. Hornick Typed or printed name of person signing CR2E127 (10/11) President/Treasurer/Director Title of person signing

FILING FEE \$35 Make checks payable to Florida Department of State and Mail to: Division of Corporations•PO Box 6327•Tallahassee, FL 32314

Howden Insurance Services, Inc.

.

.

Officers and Directors 08/28/2013 FILED 13 SEP 23 PH 2:09 SECRETARY UF STATE TALLAHASSEE, FLORIDA

Karen M. Hornick, President/Treasurer/Director 902 Carnegie Center Suite 304 Princeton, NJ 08540

· · · - --

,

• •

· · · · ·

Mark M. Coons, Secretary/Director 902 Carnegie Center Suite 304 Princeton, NJ 08540