

F1300000 5392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

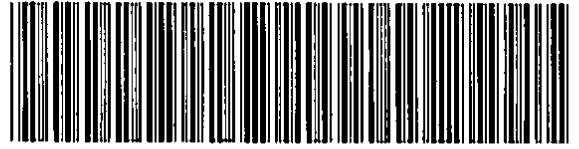
(Business Entity Name)

(Document Number)

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A. RAMSEY

JUN 27 2023

**CT CORP**  
**(850)656-4724**  
**3458 Lakeshore Drive,**  
**Tallahassee, FL 32312**

**Date:** 06/26/2023

*eric [signature]*

Acc#I20160000072

Name:	Central Mutual Insurance Company
Document #:	
Order #:	14727336

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input type="checkbox"/>
	Plain: <input checked="" type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notificati

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Availability _____
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Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **35.00**

Thank you!

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

1. The name of the corporation: Central Mutual Insurance Company  
2. The principal office address: 800 S Washington Street  
Van Wert, OH 45891

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 04/17/1876 Document number: F13000005392

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)

Corporate Creations Network Inc.  
801 US Highway 1 North  
Palm Beach, FL 33408

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

C T Corporation System  
1200 South Pine Island Road  
Plantation, Florida 33324

P.O. Box NOT acceptable

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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.

Denise Bell  
Signature of an officer or director

DENISE BELL, ATTORNEY-IN-FACT  
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.*

By: Sean L. Emerich SEAN L. EMERICH, ASSISTANT SECRETARY  
Signature of Registered Agent

12/22/2022  
Date

If signing on behalf of an entity:

C T Corporation System  
Typed or Printed Name

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