

F14000000942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

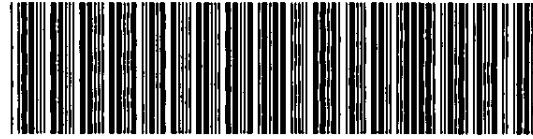
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/13/14--01006--004 **35.00

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SECRETARY OF STATE
TALLAHASSEE, FL 32399

affidavit

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COVER LETTER

TO: Amendment Section
Division of Corporations

PMC INSURANCE AGENCY INC

SUBJECT: CHANGE TO OFFICERS AND OR DIRECTORS

Name of Corporation

DOCUMENT NUMBER: F 14000000942

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:

GRACE BRADY

Name of Contact Person

PMC INSURANCE AGENCY INC

Firm/Company

209 BURLINGTON ROAD, SUITE 109

Address

BEDFORD, MA 01730

City/State and Zip Code

grace@pmcinsurance.com

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

For further information concerning this matter, please call:

GRACE BRADY

Name of Contact Person

at (781) 449-7744 X162

Area Code & Daytime Telephone Number

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

☒ \$35.00 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

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14 MAY 27 AM 10:20
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TALLAHASSEE, FL 32301



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FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 29, 2014

DAVID MALLOY
PMC INSURANCE AGENCY, INC.
209 BURLINGTON ROAD, SUITE 109
BEDFORD, MA 01730-1422

SUBJECT: PMC INSURANCE AGENCY, INC.
Ref. Number: F14000000942

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

Our office does not keep records of the stock holders. If you wish to change your officers you will need to complete the attached form. I am enclosing a copy of what we currently have on file for your corporation.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 214A00009126



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

(Note: Applicable only during the first calendar year of qualification)

1. The name of the foreign corporation as it appears on the records of the Florida Department of State is:

PMC INSURANCE AGENCY INC

2. This entity was authorized to transact business in Florida on 2-28-14 and its Florida document number is F14000000942

3. This corporation was formed under the laws of MA

4. The name and address of each officer and/or director is as follows:

Title:

PRESIDENT

Name and Address

DAVID M. MALLOY

209 BURLINGTON RD, SUITE 109

BEDFORD, MA 01730

TREASURER

GREGORY MALLOY

209 BURLINGTON RD, Suite 109

BEDFORD, MA 01730

SECRETARY

ANDREW D SHAW

209 BURLINGTON RD, Suite 109

BEDFORD, MA 01730

(Attach additional pages if necessary)

David Malloy
Signature of an officer or director

David Malloy
Typed or printed name of person signing

President
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