

F19 000003597

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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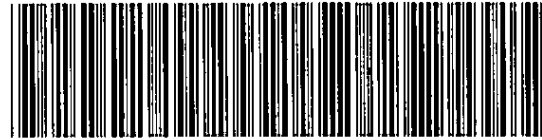
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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OCT 29 2022

S. PRATHE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Midwest Builders' Casualty Mutual Company
Name of Corporation

DOCUMENT NUMBER: F19000003597

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stacey Showalter

Name of Contact Person

Midwest Builders' Casualty Mutual Company

Firm/Company

1100 Walnut St. Suite 3010

Address

Kansas City, MO 64106

City/State and Zip Code

sshowalter@mwbc.com

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

For further information concerning this matter, please call:

Stacey Showalter

at (816) 701-7011

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

1. The name of the corporation: Midwest Builders' Casualty Mutual Company
2. The principal office address: 2900 SW Wanamaker Dr, Suite 204, Topeka, KS 66614
3. The mailing address (if different): 1100 Walnut St, Suite 3010, Kansas City, MO 64106
4. Date of incorporation/qualification: 08/05/2019 Document number: F19000003597
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)

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301-2525

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

Michael Beane, c/o Moore, Ingram, Johnson & Steele, L.L.P

10201 Centurion Parkway Ste 401

P.O. Box NOT acceptable

Jacksonville, FL 32256

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

Shannon Burns, CFO/Treasurer

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.

/S/Michael R. Beane

Signature of Registered Agent

7/13/2022

Date

If signing on behalf of an entity:

Michael R. Beane

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 (04/13)

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TALLAHASSEE, FLORIDA