F9300003172

(F	Requestor's Name)		
· (A	\ddress)		
	Address)		
(7			
(0	City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL	
/6	Business Entity Name)		
(L	susiness Entity Name;		
,			
(Document Number)			
Certified Copies	Certificates of	Status	
•			
			
Special Instructions t	o Filing Officer:		
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Office Use Only



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04/22/08--01022--029 **25.00

05/07/08--01012--019 **60.00

BECRETARY OF STATE

RACHO



US CorpWorks Inc.

23 Butler Avenue Maynard, MA 01754 www.uscorpworks.com

Phone: 888.967.5799 Fax: 978.897.5905

March 31, 2008

Via US Mail

Division of Corporations Florida Department of State PO Box 6327 Tallahassee, FL 32314

Re: Asurion Roadside Assistance Services, Inc.

Asurion Insurance Services, Inc.
Asurion Warranty Services, Inc.
Asurion Credit Protection Services, LLC
Asurion Protection Services, LLC
Asurion Warranty Protection Services of Florida, LLC
Asurion Florida Warranty Services, Inc.
Warranty Corporation of America
Wireless TLC, Inc.

To Whom It May Concern:

Enclosed for filing in your office are the following document(s) along with a check covering your fees:

Change of Registered Agent

Please call the toll-free number listed above if for any reason, the filing(s) can not be made.

Thank you for your time and consideration in this matter.

Sincerely,

Sabrina Tillapaugh

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this cange is submitted for a corporation organized under the laws of the State of Texas er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: Asurion Roadside Assistance Services, Inc.	
2. The principal	office address: 140 Cypress Station Drive, Suite 300, Houston, TX 77090	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 07/09/1993 Document number: F93000003172	
	d street address of the current registered agent and registered office on file with the rtment of State:	
	Corporation Service Company	
	1201 Hays Street	
	Tallahassee, FL 32301	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	-
	NRAI Services, Inc.	,
	2731 Executive Park Drive, Suite 4 (P.O. Box NOT acceptable)	
	Weston, FL 33331)
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board or the corporation has been notified in writing of the change.	
(Signatur	Sabrina Tillapaugh, Vice President (Printed or typed name and title)	
I hereby accept a further agree to of my duties, and document is beir corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.	
ALCX UNINGS IB	gnature of Registered Agent) (Date)	
If signing on bel	half of an entity.	

Sabrina Tillapaugh, Asst. Secretary

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(Typed or Printed Name)

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