## 02 AUG -8 PM 4: 14

ACCOUNT NO.

0721000đ**ặ** 

REFERENCE

681795

AUTHORIZATION

COST LIMIT \$ 35.00

ORDER DATE: July 29, 2002

ORDER TIME: 9:44 AM

ORDER NO. : 681795-040

CUSTOMER NO: 4340722

CUSTOMER: Ms. Jeannie Aragon-cruz

Assurant Group

11222 Quail Roost Drive

Miami, FL 33157

## CHANGE OF AGENT

500006983865--9

NAME: PAS FINANCIAL GROUP, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Mimi Stephens

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

	e provisions of sections 607.0502, 617.0502, 6	•
_	d corporation organized under the laws of the S lowing statement in order to change its register	-
suomus me joi the State of Flo		rea office or registerea agent, or both, th
y	f the corporation:	
PAS FINAN	CIAL GROUP, INC.	
2. The mailing	address of the corporation: C/O CANTEY HANG	ER ET AL., - 801 CHERRY STREET
FT. WORTH	I, TX 76102	
3. Date of inco	orporation/qualification: August 16, 1993	Document number: F93000003762
	nd address of the current registered agent and off	
	CT Corporation System	
	1200 South Pine Island Road	
	Plantation, FL 33324	-d.o. S
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  (P. O. Box Not Acceptable)		
	Corporation Service Company	
	1201 Hays Street	Fig. 2 D
	Tallahassee, FL 32301	STATE OF THE PERSON OF THE PER
The street addragent, as chang	ress of its registered office and the street addresged, will be identical.	ss of the business office of its registered
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.		
$\mathcal{L}_{011,00}$	P D C	8/8/02
(Signature	of an officer, chairman or vice chairman of the board)	(Date)
AURA R. DUNLA	AP, Attorney in Fact	
Umina haan n	(Printed or typed name and title)	of an according to the state of
corporation, L I further agree	amed as registered agent and to accept service hereby accept the appointment as registered ag to comply with the provisions of all statutes re f my duties, and I am familiar with and accept	gent and agree to act in this capacity. clative to the proper and complete
Corporation S	Service Company	alalana
ynth	Signature of Registered Agent)	8/8/2002 (Date)
f signing on beha	lf of an entity:	
CYNTHIA L. HA		Assistant Vice President
(	Typed or Printed Name)	(Capacity)

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