## F94000005077

(Re	equestor's Name)	· <del>-</del>				
(Ad	dress)					
(Ad	dress)					
(Cit	ty/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Na	me)				
(100	cument Number)	l				
Certified Copies	_ Certificate:	s of Status				
Special Instructions to Filing Officer:						
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Office Use Only



800213862578

11/07/11--01025--023 \*\*35.00

RA Change

FILED 2011 NOV -7 PM 2: 02 SECRETARY OF STATE SECRETARY OF STATE

ADR 11/10/11



November 1, 2011

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Davis-Garvin Agency, Inc.

Dear Filing Officer:

Please file the attached Change of Agent for the referenced company. Enclosed please find a check for the requisite fees. Please return evidence of filing to my attention via regular mail.

If for any reason the enclosed cannot be filed upon receipt, please contact the undersigned immediately at (800) 862-5438. Thank you very much for your assistance.

Very truly yours,

Denise Bell

Senior Client Specialist

Encl.

## **COVER LETTER**

то:	Amendment Section Division of Corporation	ns		
SUBJ	ЕСТ:	Davis-Garvin A	gency, Inc.	
DOCU	JMENT NUMBER:		000005077	
The en	closed Statement of Cha	nge of Registered Offic	e/Agent and fee are su	bmitted for filing.
Please	return all correspondence	e concerning this matte	r to the following:	
			e Bell	
	<del>_</del> .	Name of Co	ntact Person	· •
		NIDAL O		
			rate Services	
			. ,	
		16055 Space Cen	ter Blvd., Ste. 235	
		Add	ress	<del></del>
		Houston,	TX 77062 nd Zip Code	
		City/State a	iu zip code	
	-	dgacctreq@da		······································
	E-mail add	lress: (to be used for f	uture annual report r	otification)
For fur	ther information concerr	ning this matter, please o	call:	
	Denise I	Bell	_at ( 800 )	862-5438
	Name of Contac	et Person	Area Code & D	aytime Telephone Number
Enclos	ed is a \$35.00 check mad	le payable to the Depart	ment of State.	
	Division P.O. B	g Address: dment Section on of Corporations fox 6327 assee, FL 32314	Clifton Bui	nt Section  Corporations

Tallahassee, FL 32301

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

			07.1508, or 617.1508, Fl under the laws of the Sta	
	•		agent, or both, in the Sta	
1. The name of the cor	rporation: Davis-	Garvin Agend	y, Inc.	
2. The principal office	address: One Fe	rnandina Ct., Co	olumbia, SC 29221-	1627
3. The mailing address	s (if different):			
4. Date of incorporation	on/qualification:	09/29/1994	Document number:	F9400005077
5. The name and street Florida Department			and registered office on	file with the
CT	Corporation Sys	tem		<u>~</u> ~
120	0 South Pine Isl	and Road		THE T
Plar	ntation, FL 3332	24		PILLAHASS
6. The name and street (if changed):	t address of the new	registered agent (if	changed) and /or register	_
NR	RAI Services, In	C.		92
515	East Park Ave			
Tall	ahassee, FL 32	P.O. Box NOT acce	ptable	· · · · · · ·
The street address of its changed will be ide	its registered office entical.	and the street addi	ess of the business offic	ee of its registered agent,
Such change was auth authorized by the boa	norized by resolution rd, or the corporation	on duly adopted by on has been notifie	its board of directors or d in writing of the chang	by an officer so ge.
Signature of an o	officer or director	<u> </u>	Mark E. Fryer	r. President
I hereby accept the ap I further agree to com of my duties, and I am document is being file corporation has been NRAI Services, In	opointment as regis iply with the provis if familiar with and ad merely to reflect notified in writing C.	tered agent and ag ions of all statutes accept the obligati a change in the reg of this change.	ree to act in this capaci relative to the proper ar on of my position as reg gistered office address, l	ty, id complete performance istered agent. Or, if this hereby confirm that the
by: Signature of	Registered Agent	<u> </u>	/ <i>D-12</i> Date	- [/
f signing on behalf of	f an entity:			
	ell, Asst. Secy.			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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