F96000001817

Florida Department of State
Division of Corporations
Public Access System

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To:
Division of Corporations
Fax Number : (850)205-0380

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5926

Attn: Teresa

REGISTERED AGENT CHANGE

M & I INSURANCE SERVICES, INC.

Certificate of Status	0
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Estimated Charge	$35.00

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T BROWN DEC - 9 2005

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RECEIVED
05 DEC -8 AM 8:00
DIVISION OF CORPORATION

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Electronic Filing Menu Corporate Filing Public Access Help

December 8, 2005

FLORIDA DEPARTMENT OF STATE
Division of Corporations

M & I INSURANCE SERVICES, INC.
770 N WATER ST
MILWAUKEE, WI 53202

SUBJECT: M & I INSURANCE SERVICES, INC.
REF: F96000001817

We have received your document for M & I INSURANCE SERVICES, INC. and your check(s) totaling $. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The date of qualification is florida was April 12, 1996.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Teresa Brown
Document Specialist

FAX Aud. #: H05000281018
Letter Number: 405A00071096

RECEIVED
05 DEC -9 AM 8:00
DIVISION OF CORPORATIONS

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1308, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of WI *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: M & I Insurance Services, Inc.
2. The principal office address: 770 N. Water Street
   Milwaukee, WI 53202
3. The mailing address (if different):
4. Date of incorporation/qualification: 4/12/96 Document number: F96000001817
5. *The name and street address* of the current registered agent and registered office on file with the Florida Department of State:

   William Wade
   800 Laurel Oak Drive #101
   Naples, FL 33963-2737

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

   C T Corporation System
   1200 South Pine Island Road
   (P.O. Box NOT acceptable)
   Plantation, FL 33324

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.

W. K. Curtis — William K. Curtis, Sr. VP/Director
(Signature of an officer or director) (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.

Beverlee Stuewe — 12/07/05
(Signature of Registered Agent) (Date)

If signing on behalf of an entity: **Assistant Secretary**

CT Corporation System
(Typed or Printed Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR1E045 (8/05)