(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



800261467488



CORPORATION SERVICE COMPANY ACCOUNT NO. : I20000000195

REFERENCE : 204368

AUTHORIZATION : (

COST LIMIT :

ORDER DATE : July 3, 2014

ORDER TIME : 4:40 PM

ORDER NO. : 204368-030

CUSTOMER NO: 4319445

CHANGE OF AGENT

NAME: BOLLINGER, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Emily Gray

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 6 ange is submitted for a corporation or to change its registered office of	n organized under 1k	e laws of the Sta	ne of New Jersey	
1. The name of	the corporation: BOLLINGER INS	URANCE PROGRA	MS, INC.		
2. The principal	office address:				
3. The mailing a	address (if different):				
4. Date of incor	poration/qualification: 05/01/1990	6 Docum	ent number: F9	6000002186	
	d street address of the current registrement of State: (If resigned, enter		stered office on t	file with the	
	United Corporate Services, Inc.				
	9200 S Dadeland Blvd.			- 4 . 	<u> </u>
	Miami, FL 33156				
6. The name and (if changed):	I street address of the new register				
	Corporation Service Company				 بن
	1201 Hays Street			-	. (2)
	Tallahassee	Box NOT acceptable	FL 32301	LANCE	
The street address changed will	ess of its registered office and the be identical.	street address of th	e business office	e of its registered	agent,
Such change wa authorized by th	as authorized by resolution duly a ne board, or the corporation has b	dopted by its board een notified in writi	of directors or b	oy an officer so	
_ April	Claus - Baid	APRIL	HANES-L Printed or typed name	DOWN, SECRE	ETARY
I hereby accept I further agree performance of agent. Or, if th hereby confirm Corporation	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been no in Service Company	ent and agree to ac full statutes relative in and accept the obl to reflect a change tifled in writing of t			ed '
By:	nature of Registered Agent		(p/24/14) Date		
,,	half of an entity:				
Amy Gudgel, A	sst. V.P.				
T	yped 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 (03/12)

COVER LETTER

TO: Amendment Section Division of Corporations					
BOLLINGER, INC. SUBJECT:					
Name of Corporation					
DOCUMENT NUMBER: F96000002186					
The enclosed Statement of Change of Registered Office/Agent an	d fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:					
April Hanes-Dawd Name of Contact Perso A May J. Gallastar Ho Firm/Company Two Pive Place Address I tusca, IL City/State and Zip Code Day Hane Denholland or E-mail address: (to be used for future annual	Bollinger VI43				
For further information concerning this matter, please call:					
April Haves - David at (630) 285-3564 Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Department of State.					
Amendment Section A Division of Corporations D P.O. Box 6327	Atreet Address: Amendment Section Division of Corporations Clifton Building 661 Executive Center Circle				

Tallahassee, FL 32301