

F9700/0005144

Requester Name

Address

Number 0260 3044 2471

From This portion can be removed for Recipient's records.

Date 7/18/01

FedEx Tracking Number

826830442471

Sender's Name

ALISA L. WOODALL

Phone

949 206-6200

Company

Z C STERLING INSURANCE AGENCY

X6217

Office Use Only

if known):

Address

9800 MUIRLANDS BLVD

Dept./Room/Suite/Room

IRVINE

State

CA

ZIP

92618

Internal Billing Reference

2.

(Corporation Name)

(Document #)

600004486156--9

-07/19/01--01065--015

*****35.00 *****35.00

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☐

Walk in

☐

Pick up time

☐

Certified Copy

☐

Mail out

☐

Will wait

☐

Photocopy

☐

Certificate of Status

NEW FILINGS

☐

Profit

☐

Not for Profit

☐

Limited Liability

☐

Domestication

☐

Other

AMENDMENTS

☐

Amendment

☐

Resignation of R.A., Officer/Director

☐

Change of Registered Agent

☐

Dissolution/Withdrawal

☐

Merger

OTHER FILINGS

☐

Annual Report

☐

Fictitious Name

REGISTRATION/QUALIFICATION

☐

Foreign

☐

Limited Partnership

☐

Reinstatement

☐

Trademark

☐

Other

01 JUL 19 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

F97006005144
288 RA CR
7-19-01
em

Examiner's Initials

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of California
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.

1. The name of the corporation: ZC Sterling Insurance Agency, Inc.
2. The mailing address of the corporation: 210 Interstate North Parkway, Suite 400
Atlanta, GA 30339
3. Date of incorporation/qualification: 10/01/1997 Document number: F97000005144
4. The name and address of the current registered agent and office:

NRAI Services, Inc.

526 E Park Avenue

Tallahassee, FL 32301

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)

Michael Seminario

8655 Baypine Road Building #6

Jacksonville, FL 32256

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.

Alisa L. Woodall

(Signature of an officer, chairman or vice chairman of the board)

7/6/01

(Date)

ALISA L. WOODALL

VICE PRESIDENT

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Michael Seminario

(Signature of Registered Agent)

7-9-2001

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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