

(Re	equestor's Name)		
, (Ac	idress)		
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(Ci	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	usiness Entity Nar	me)	
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: March 6, 2017

Order#: 531122-036

Re: DIRECT GENERAL INSURANCE AGENCY, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Mary Rivers

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	nge is submitted for a corpora	2, 617.0502, 607.1508, or 617.1508, Florida State ation organized under the laws of the State of <u>Ten</u> e or registered agent, or both, in the State of Flori	nessee	
 The name of t The principal 	he corporation: DIRECT GEN office address:	ERAL INSURANCE AGENCY, INC. boro Road, Nashville, TN 37217		
<u></u>			• Marie 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	_
4. Date of incorporation/qualification: 12/11/1997 Document number: F9700		997 Document number: F970000065	i35	
	street address of the current retirement of State: (If resigned, en	egistered agent and registered office on file with the ter resigned)	he	
	NRAI SERVICES, INC			
	1200 South Pine Island Road			
	Plantation	FL 33324		
6. The name and (if changed):	street address of the new regis	stered agent (if changed) and /or registered office	<u>.</u> 1	
	Corporation Service Compan	у		
	1201 Hays Street		• ***	
		O. Box NOT acceptable		
	Tallahassee	FL 32301		
as changed will	be identical.	the street address of the business office of its reg		
Such change was authorized by the	s authorized by resolution dule board, or the corporation ha	y adopted by its board of directors or by an offic s been notified in writing of the change.	er so	
9/11	<i>S</i>	Jeffrey Weissmann, Secretary		
U I hereby accept to I further agree to performance of to agent. Or, if this hereby confirm t	o comply with the provisions (ny duties, and I am familiar v s document is being filed mer	Printed or typed name and title agent and agree to act in this capacity, of all statutes relative to the proper and complete with and accept the obligation of my position as re ely to reflect a change in the registered office ad notified in writing of this change.	registerea	
By: Lhac	a Cokubi	03/02/2017		
Sign If signing on beh	nature of Registered Agent	Date		
	Assistant Vice President			
	ped or Printed Name	_		

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