Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000339982 3)))



H220003399823ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

\supset	
	'
٠.	-
<u>. 24</u>	_
X	
<u> </u>	1
-	
۲-	
-	
100	
\subseteq	
\mathcal{C}	
24	**Ent
2022	
$\overline{}$	•

Division of Corporations

Fax Number : (850)617-6380

To:

From:

Account Name : UNITED AGENT GROUP INC.

Account Number : I20160000086
Phone : (561)508-5033
Fax Number : (561)694-1639

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email	Address:							
-------	----------	--	--	--	--	--	--	--

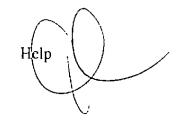
51:01 -4 WH 10: #2

REGISTERED AGENT CHANGE TECHNOLOGY INSURANCE COMPANY, INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu



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

statement of cha	provisions of sections 607.0502, 617.0502, 607.150 ange is submitted for a corporation organized undel ler to change its registered office or registered agen	r the laws of the State of <u>Delaw</u>	
	the corporation: TECHNOLOGY INSURANC	-	
	office address:LANE_43RD FLOOR_NEW YORK, NY 1003	8	
3. The mailing a	address (if different): 800 SUPERIOR AVE E. 215	ΓFL CLEVELAND, OH 44114	
4. Date of incorp	poration/qualification: 11/10/1998 Docu	ument number: F98000006194	
5. The name and	d street address of the current registered agent and re rtment of State: (If resigned, enter resigned)		
	CHIEF FINANCIAL OFFICER		
	200 E. GAINES ST		
	TALLAHASSEE, FL 32399-0000		2022 0
6. The name and (if changed):	d street address of the new registered agent (if chang	ed) and /or registered office	2022 OCT -4
	United Agent Group Inc.	し、 とかか 	>
	801 US Highway 1	m.	AM 10: 4:
	P.O. Box NOT accepta	ble	ւ,5
	North Palm Beach, FL 33408		
The street addre	ess of its registered office and the street address of be identical.	the business office of its registere	ed agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its boathe board, or the corporation has been notified in wi	ard of directors or by an officer so riting of the change.	}
As	hlay Parkins Ashley	Perkins, Attorney-in-Fact	
Signatui	re of all officer or director	Printed or typed name and title	
I hereby accept I further agree t of my duties, an document is beil corporation has	the appointment as registered agent and agree to to comply with the provisions of all statutes relatived I am familiar with and accept the obligation of n ing filed merely to reflect a change in the registered s been notified in writing of this change.	act in this capacity. The to the proper and complete per ny position as registered agent. Of the difference of the confirm of	formance Or, if this 1 that the
Ashley	Parkins manure of Registered Agent	10/4/2022	
Sign	mature of Registered Agent	Date	
If signing on bei	chalf of an entity:		
Ashley Pc	erkins, Special Secretary		
Ty	yped or Printed Name		
	* * * FILING FEE: \$35.00	* * *	