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.

(((H15000046540 3)))



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

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: C T CORPORATION SYSTEM Account Name

Account Number: FCA000000023 Phone : (850)222-1092 : (850)878-5368 Fax Number

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

Email Address:

REGISTERED AGENT CHANGE ALL RISKS, LTD. OF THE SOUTHEAST, INC.

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

Electronic Filing Menu

Corporate Filing Menu

Help

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of Maryland or to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: ALL RISKS, LTD. OF THE SOUTHEAST, INC.
1. The page of	office address: 10150 York Road, 5th Floor, Hunt Valley, MD 21030
z. The principal	Office address:
3. The mailing o	address (if different):
4. Date of incorp	poration/qualification: 10/04/1999 Document number: F99000005268
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Marie Taylor
	3363 W. Commercial Blvd., Suite 115
	Ft. Lauderdale, FL 33309
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	C T Corporation System
	c/o C T Corporation System, 1200 South Pine Island Road
	P.O. Box NOT acceptable Plantation, Florida 33324
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, i be identical.
Such change wanthorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
	meland Mark Melander, CAO rented of typed panie and wife rented of typed panie and wife
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete fmy duties, and I am familiar with and accept the obligation of my position as registered is document is being filted merely to reflect a change in the registered office address. I that the corporation has been notified in writing of this change.
By:	reportation System 0-2/23/20/5
If signing on be	chalf of an entity:
	Schuman, Asst. Secretary Typed or Printed Name
* * * FILING FEE: \$35.00 * * *	
M CR2E045 (03/12)	MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE IAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FL006 - 05/28/2013 Webers Kharer Ordine