

F99000005582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

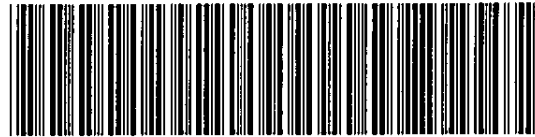
(Business Entity Name)

(Document Number)

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RECEIVED  
11 AUG 15 AM 10:37  
LEGAT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
11 AUG 15 AM 11:06  
SECRETARY OF STATE  
DIVISION OF CORPORATION

*BA. Chg.*  
C.COULLIETTE

AUG 15 2011

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 873081 7839224

AUTHORIZATION

A handwritten signature in black ink, appearing to read "Spuddelean", is written over the word "AUTHORIZATION".

COST LIMIT : \$ 35.00

ORDER DATE : August 8, 2011

ORDER TIME : 9:12 AM

ORDER NO. : 873081-015

CUSTOMER NO: 7839224

CHANGE OF AGENT

NAME: CENTERSTONE INSURANCE AND  
FINANCIAL SERVICES

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

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, this statement of change is submitted for a corporation organized under the laws of the State of California \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CENTERSTONE INSURANCE AND FINANCIAL SERVICES, INC.

2. The principal office address: 4851 LBJ Freeway, Suite 1100, Dallas, TX 75244

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 10/29/1999 Document number: F99000005582

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation System

1200 South Pine Island Road

Plantation FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

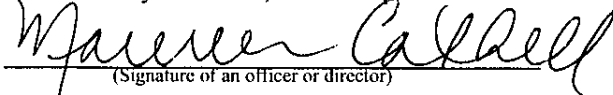
1201 Hays Street

(P.O. Box NOT acceptable)

Tallahassee, FL 32301

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, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

Maureen Cathell, Vice President

(Printed or typed name and title)

*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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Corporation Service Company

By: 

(Signature of Registered Agent)

08/08/2011

(Date)

If signing on behalf of an entity:

Sylvia Queppet, Asst. VP

(Typed 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 (8/05)

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