G20793

Florida Department of State
Division of Corporations
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REGISTERED AGENT CHANGE
SUNCOAST PENSION AND BENEFITS GROUP, INC.

Certificate of Status	0
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUNCOAST PENSION AND BENEFITS GROUP, INC
Name of Corporation

DOCUMENT NUMBER: 020793

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jessica Alley
Name of Contact Person

Ascensus, Inc.
Firm/Company

105 Eisenhower Pkwy, 4TH FLOOR
Address

Roseland, NJ 07068
City/State and Zip Code

Jessica.alley@ascensus.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BREE BELMONTE at (212 590-9310)
Name of Contact Person — Area Code & Daytime Telephone Number

Enclosed is a $35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

PLAIN - [illegible]

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 FLORIDA *In order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: SUNCOAST PENSION AND BENEFITS GROUP, INC

2. The principal office address: 508 W. FLETCHER, SUITE 111, TAMPA FL 33612 US

3. The mailing address (if different): P. O. BOX 82040, TAMPA FL 33682 US

4. Date of incorporation/qualification: 01/28/1983 Document number: G20793

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

JAMES R. FELITZ

508 W. FLETCHER AVENUE, SUITE 111

TAMPA FL 33612 US

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

CT Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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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

Joseph Danis Kn 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.

By: C.T. Corporation System

Signature of Registered Agent

1/16/2013

Date

If signing on behalf of an entity:

Michael Malkowski
Vice President

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

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