

G59798

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200013619202

FILED
03 MAR 12 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
03 MAR 12 PM 4:53
DEF. DIV. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

C. Coulliette MAR 12 2003



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 938397 153113A

AUTHORIZATION :

COST LIMIT : \$ 35.00

Patricia Kijak

ORDER DATE : February 20, 2003

ORDER TIME : 3:0 PM

ORDER NO. : 938397-050

CUSTOMER NO: 153113A

CUSTOMER: Ms. Connie Turnipseed
Fortis Benefits Insurance Co.
2323 Grand Blvd.

Kansas City, MO 64108-2670

CHANGE OF AGENT

NAME: INTERNATIONAL DENTAL PLANS,
INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX _____ CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT# 1140

EXAMINER: _____

**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: INTERNATIONAL DENTAL PLANS, INC.
2. The principal office address: 2323 Grand Boulevard, Kansas City, MO 64108-2670
3. The mailing address (if different): P.O. Box 419052, Kansas City, MO 64141-6052
4. Date of incorporation/qualification: September 16, 1983 Document number: G59798
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 or personal mailbox 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.

Kenneth D. Bowen
(Signature of an officer, chairman or vice chairman of the board)

Kenneth D. Bowen, Secretary
(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.

Cynthia L. Harris
(Signature of Registered Agent)

3/10/05
(Date)

If signing on behalf of an entity:

**Cynthia L. Harris
as its agent**

(Typed or Printed Name)

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

FILED
03 MAR 12 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA