## G78954

(Requestor's Name)			
(Address)			
(			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Codification of Order			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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## **COVER LETTER**

TO: Amendme Division o	nt Section f Corporations			
SUBJECT:	PRINCIPAL INSURANCE A	DJUSTERS I, INC.		
DOCUMENT NU	MBER: G7	8954		
The enclosed State	ement of Change of Registered Office/A	gent and fee are submitted for filing.		
Please return all co	orrespondence concerning this matter to	the following:		
ARTHUR B. D'ALMEIDA				
	Name of Conta	ct Person		
ARTHUR R. DIALMEIDA, D.A.				
ARTHUR B. D'ALMEIDA, P.A. Firm/Company				
105 EAST PALMETTO PARK ROAD				
	Addres	S		
	DOCA DATON	EL 22422		
BOCA RATON, FL 33432 City/State and Zip Code				
dalmeidalaw@gmail.com  E-mail address: (to be used for future annual report notification)				
	·	·		
For further informa	ation concerning this matter, please call	:		
Δ	rthur B. D'Aimeida	561 369 4674		
	me of Contact Person	at ( 561 ) 368-4674 Area Code & Daytime Telephone Number		
Enclosed is a \$35.0	00 check made payable to the Departme	ent 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		
	* milailaggood, † 17 767 17	2001 Exceditte Celler Circle		

Tallahassee, FL 32301

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida lange is submitted for a corporation organized under the laws of the State of	Florida
	der to change its registered office or registered agent, or both, in the State of a corporation: Principal Insurance Adjusters I, Inc.	rioriaa.
	I office address: 3598 W. Prospect Road	
	erdale, FL 33309	
3. The mailing	address (if different):	
4. Date of incor	poration/qualification: 01/17/1984 Document number:	G78954
	d street address of the current registered agent and registered office on file w rtment of State: (If resigned, enter resigned)	ith the
	Warren Aplin	
	3598 W. Prospect Road	
	Fort Lauderdale, FL 33309	_
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered of	fice STATE OF STATE
	Arthur B. D'Almeida, P.A.	F 3 6
	105 East Palmetto Park Road	15 2 O
	P.O. Box NOT acceptable	- Kara
	Boca Raton, FL 33432	- 62 5
The street address changed will	ess of its registered office and the street address of the business office of i be identical.	SASA -C
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an ne board, or the corporation has been notified in writing of the change.	officer so
Signatur	Keith K. Peer, C	EO
I hereby accept I further agree to of my duties, an accument is bei corporation has	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 cond I amiliar with and accept the obligation of my position as registere ng filed merely to reflect a change in the registered office address, I here to be notified in writing of this change	nplete performance d agent. Or, if this by confirm that the
JAK	nature of Registered Agent Date	·
If signing on be	half of an entity:	
	thur B. D'Almeida	

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