

H00982

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
 Fax Number : (850)617-6380

From: Account Name : C T CORPORATION SYSTEM  
 Account Number : FCA000000023  
 Phone : (850)222-1092  
 Fax Number : (850)878-5368

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12 MAR 20 PM 2:30  
TALLAHASSEE, FLORIDA

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

Email Address: \_\_\_\_\_

REGISTERED AGENT CHANGE  
B&B PROTECTOR PLANS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

RECEIVED  
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Handwritten initials/signature

MAR 20 2012  
C. MUSTAIN

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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: B&B PROTECTOR PLANS, INC.
2. The principal office address: 3101 W DR MARTIN LUTHER KING JR BLVD SUITE 400 TAMPA FL 33607
3. The mailing address (if different): 3101 W DR MARTIN LUTHER KING JR BLVD SUITE 400 TAMPA FL 33607
4. Date of incorporation/qualification: 4/27/1984 Document number: H00982
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)

CORPORATION SERVICE COMPANY
1201 HAYS ST. TALLAHASSEE FL 32301

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

Sharin Aldao, 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
[Handwritten Signature]
Signature of Registered Agent

03/09/2012
Date

If signing on behalf of an entity:

Kristin Bolden
Assistant Secretary

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

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

CR2B045 (8/05)

FL006 - 07/22/2009 C T System Online