2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# H41832

FILED Nov 20, 2009 Secretary of State

Entity Name	: NATIONAL	SERVICE INSURANCE AGENO	CY, INC.		
Current Principal Place of Business:			New Principal Place	of Business:	
6534 WATER SARASOTA,					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
6534 WATER SARASOTA,					
FEI Number: 59	9-2495076	FEI Number Applied For ()	El Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
DUMBAUGH 1900 RINGLII SARASOTA,	NG BLVD.	US			
The above na in the State o		bmits this statement for the purp	ose of changing its registere	d office or registered agent, or both,	
SIGNATURE	: JOHN D DI	JMBAUGH			
	Electronic	Signature of Registered Agent		Date	
		2)(b), F.S., the corporation did not red Trust Fund Contribution ().	ceive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$	
Name: E Address: 6	PSTD () D DIBELLO, SHERI 6534 WATERFOR BARASOTA, FL	RD CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: S Address: 4	` '	elete O, BRANWEN R UNIT 402	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARON F DIBELLO PRES 11/20/2009