Basic

Insurance

Toup

GIST HOOK LANS hone #

Boynton Beach, Florida 33437

H92858

Examiner's Initials

CORROR	Office Use Only
CORPORATION NAME(S) & DOCU	MENT NUMBER(S), (if known):
	7000033855373
1	-09/07/0001066006
(Corporation Name)	*****35.00 *****35.00 (Document #)
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2. (Corporation Name)	in the second se
(Colporation Name)	(Document #)
3. (Corporation Name)	
(Corporation Name)	(Document #)
4	
4. (Corporation Name)	(D
(Corporation Name)	(Document #)
Walk in Pick up time	—
	Certified Copy
☐ Mail out ☐ Will wait	Photocopy Certificate of Status
	Status of Status
NEW FILINGS	AMENDMENTS
☐ Profit	
	Amendment
Not for Profit	Resignation of R.A., Officer/Director
☐ Limited Liability	Change of Registered Agent
☐ Domestication	☐ Dissolution/Withdrawal
☐ Other	☐ Merger
OTHER FILINGS	
<u> </u>	REGISTRATION/QUALIFICATION
Annual Report	☐ Foreign
☐ Fictitious Name	
·	Limited Partnership
	Reinstatement Trademark RA Chg. (address)
	Trademark
	U Other

STATEMENT OF CHANGE OF REGISTERED OFFICE FOR CORPORATIONS

	ion 607.0502(3), 617.0502(3), 607.1508(2), or 617.1508(2),
Florida Statutes, the undersigned re	gistered agent of a corporation organized under the laws of the
State of FLORIDA	submits the following statement in order
to change the registered office in Fl	orida.
The name of the corporation:	NEW BASIC INSURANCE
UNDERWR	NEW BASIC INSURANCE
2. The street address of the current	registered office:
21	(S. FEDERAL Huy
	# 8-6
S	DYNTON BOUGH, FL. 33435
3. The street address of the new re	gistered office:
<u>6</u>	151 HOOK LANG
Be	151 HOOK LANG YNTON BEACH FL. 33437
	<u></u>
The corporation has been notified	
The street address of the registered agent, as changed, will be identical	office and the street address of the business office of the registered.
Date: 9-5-00	
7 14	PAYMOND FRECHETTE
Signature of Registered A	
′ <i>′</i>	

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Filing Fee: \$35.00