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**Division of Corporations** 

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To:

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

From:

Account Name	:	UNITED AGENT GROUP	INC.
Account Number	:	12016000086	
Phone	:	(561)508-5033	
Fax Number	:	(561)694-1639	

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

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Pursuant to th	e provisions of sections 607.0502, 617:0502, 607.1508, or 617.1508, Florida Si	tatutes, t	his	
•	hange is submitted for a corporation organized under the laws of the State of $\underline{F}$			_
in or	der to change its registered office or registered agent, or both, in the State of Fl	lorida.		
L. The name of	of the corporation: Fidelity Insurance Agency, Inc.			
	al office address: 500 Jim Moran Blvd. Deerfield Beach, FL 33442			-
	g address (if different):			
4. Date of inc	prporation/qualification: <u>12/05/1988</u> Document number: K49104	-		<u> </u>
e				
	and street address of the current registered agent and registered office on file wit partment of State: (If resigned, enter resigned) C T Corporation System	h the		
	0 0 0	h the		
	C T Corporation System	h the	20 FI	
Florida Deg	C T Corporation System  C T Corporation System  1200 South Pine Island Road  Plantation, FL 33324  and street address of the new registered agent (if changed) and /or registered offi	SECHEL	20 FEB 12	
Florida Deg 6. The name a	C T Corporation System  C T Corporation System  1200 South Pine Island Road  Plantation, FL 33324  and street address of the new registered agent (if changed) and /or registered offi	SECHEL		
Florida Deg 6. The name a	C T Corporation System   C T Corporation System	SECRETARY OF S	20 FEB 12 AM 10: 0(	-
Florida Deg 6. The name a	C T Corporation System  C T Corporation System  1200 South Pine Island Road  Plantation, FL 33324  Ind street address of the new registered agent (if changed) and /or registered offi ): United Agent Group Inc.	SECHEL		

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

Kristen Espinales, Attorney-in-Fact Printed or typed name and title

Date

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. Thereby confirm that the corporation has been notified in writing of this change.

2/12/2020

Signature of Registered Agent

If signing on behalf of an entity:

Kristen Espinales, Special Secretary

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)