2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Oct 11, 2007
Secretary of State

DOCUMENT# L05000119858

Entity Name: PROTECTUS INSURANCE SERVICES, LLC

Current Principal Place of Business:

6160 SW HWY 200
SUITE 116
OCALA, FL 34476 US

New Principal Place of Business:

194 N HWY 27
SUITE B
CLERMONT, FL 34711 US

Current Mailing Address:

6160 SW HWY 200
SUITE 116
OCALA, FL 34476 US

New Mailing Address:

FEI Number: 20-4010430 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUTSON, JOHN E
6160 SW HWY 200
SUITE 116
OCALA, FL 34476 US

Name and Address of New Registered Agent:

HUTSON, JOHN E
194 N HWY 27
SUITE B
CLERMONT, FL 34711 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN E HUTSON 10/11/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: HUTSON, JOHN E
Address: 6160 SW HWY 200, SUITE 116
City-St-Zip: OCALA, FL 34476 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: HUTSON, JOHN E
Address: 194 N HWY 27 SUITE B
City-St-Zip: CLERMONT, FL 34711 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN E HUTSON MGR 10/11/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date