

(Rec	uestor's Name)	
(Add	lress)	
(Add	lress)	
(City	/State/Zip/Phone	; #)
		MAIL
(Bus	iness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



06/07/18--01022--012 \*\*35.00

R WHITE

R. WHITE JUN 08 2016

FILED 18 JUN -7 AM 8:28 en divite Li kom

COVER LETTER
--------------

TO: Amendment Section Division of Corporations

 Commerce Group, Inc.

 Name of Corporation

 Name of Corporation

 DOCUMENT NUMBER: L43026

 DOCUMENT NUMBER: L43026

 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

 Please return all correspondence concerning this matter to the following:
 Martin E. O'Boyle

Name of Contact Person

# Commerce Group Inc.

Firm/Company

### 1280 W Newport Center Drive

Address

## Deerfield Beach, FI 33442

City/State and Zip Code

### mmelicia@commerce-group.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brenda Russell

Name of Contact Person

954 570-3513

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

<u>Mailing Address:</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (03/12)

#### 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: Commerce Group, Inc.
- 2. The principal office address: 1280 W Newport Center Drive, Deerfield Beach, FI 33442

3. The mailing address (if different):

- 4. Date of incorporation/qualification: 1/11/1990 Document number: L43026
- 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)

Resigned - Sheila L. O'Boyle

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

Martin O'Boyle

23 N Hidden Harbour Drive

P.O. Box/NOT acceptable

Gulf Stream, FI 33483

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 hoard of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

#### Martin O'Boyle, 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.

enature of Registered Agent

Signature of an officer or director

6/6/18

Date

If signing on behalf of an entity:

Typed or Printed

#### \* \* \* 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 (03/12)