

M06000003612

Florida Department of State
Division of Corporations
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09 MAY 29 AM 8:16
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TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

PEARL INSURANCE GROUP, LLC

Certificate of Status	0
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J. BRYAN

JUN - 1 2009

EXAMINER

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Pearl Insurance Group, LLC

2. (a) Principal office address of limited liability company: _____

(Note: **MUST BE STREET ADDRESS**) 1200 E GLEN AVE
PEORIA HEIGHTS IL 61616-5348

(b) Mailing address of limited liability company: _____

(Note: **MAY BE POST OFFICE BOX**) 1200 E GLEN AVE
PEORIA HEIGHTS IL 61616-5348

06/27/2006

3. Date of filing/registration in Florida

4. Document number M06000003612

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Prentice-Hall Corporation System Inc.

Registered Office Address: 1201 HAYS STREET
TALLAHASSEE FL 32301-2525

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: C T Corporation System

NEW Registered Office Address: 1200 South Pine Island Road

(MUST BE FLORIDA STREET ADDRESS) Plantation, FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Stacia Taylor
Signature of a member or authorized representative of a member

Stacia Taylor, Attorney in Fact
Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: C T Corporation System Samantha Jones
Signature of Registered Agent Assistant Secretary

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

INHS18 (05/08)

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POWER OF ATTORNEY

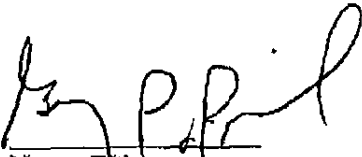
NOTICE IS HEREBY GIVEN THAT Gary P. Pearl, Officer of Pearl & Associates, ("the Corporation"), a corporation incorporated under the laws of Illinois and all subsidiary entities do hereby appoint Stacia Taylor and Laura Broderick as attorney-in-fact for the Corporation and for the subsidiary entities to act for the Corporation and for the subsidiary entities and in the name of the Corporation and of the subsidiary entities for the limited purposes authorized herein.

The Corporation and the subsidiary entities, having taken all necessary steps to authorize the changes, hereby grants its attorney-in-fact the power to execute the documents necessary to change the Corporation's and the subsidiary entities' registered agent and registered office, or the agent and office of similar import, in any state.

In the execution of any documents necessary for the purposes set forth herein Stacia Taylor shall exercise the power of Vice President, and Laura Broderick shall exercise the power of Secretary.

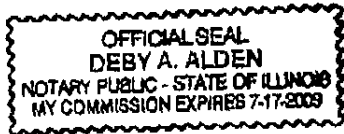
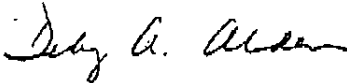
This Power of Attorney expires when revoked by any officer of Pearl & Associates.

IN WITNESS WHEREOF the undersigned has executed this Power of Attorney on this _____ day of April, 2009.



Name, Title Gary P. Pearl, President
Pearl & Associates

Subscribed and sworn to before me this 26th day of May, 2009



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Subsidiaries of
Pearl & Associates

Pearl & Associates, Ltd.
Pearl Carroll & Associates, LLC
Pearl Insurance Group, LLC
Pearl Technology Corporation

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