

M58119

9/15/97

FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS FAX #: (850) 922-4000
FROM: ALBERT J. XIQUES, ESQ. ACCT#: 110166000015
CONTACT: ALBERT J XIQUES
PHONE: (305) 377-1000 FAX #: (305) 377-1055
NAME: BARINAGA INSURANCE AGENCY INC.
AUDIT NUMBER.....H97000015264
DOC TYPE.....REGISTERED AGENT CHANGE
CERT. OF STATUS..0 PAGES..... 1
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ATTN:

DARLENE Connell
Corp. Specialist
re letter No. 497400045848

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TO: DIVISION OF CORPORATIONS FAX #: (850)922-4000
FROM: ALBERT J. XIQUES, ESQ. ACCT#: 110166000013
CONTACT: ALBERT J XIQUES
PHONE: (305)377-1000 FAX #: (305)377-1055
NAME: BARINAGA INSURANCE AGENCY INC.
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FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

September 16, 1997

BARINAGA INSURANCE AGENCY INC.
1250 S.W. 27TH AVE
MIAMI, FL 33135

SUBJECT: BARINAGA INSURANCE AGENCY INC.
REF: M58119

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6906.

Darlene Connell
Corporate Specialist

FAX Aud. #: H97000015264
Letter Number: 497A00045848

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DIVISION OF CORPORATIONS

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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Barinaga Insurance Agency, Inc.
2. The mailing address of the corporation is: 1270 S.W. 27th Avenue, Suite 204, Miami, FL 33135
3. Date of incorporation/qualification: 08/27/87 Document number: M 58119
4. The name and address of the current registered agent and office:

Victor Hugo Rams
2503 S.W. 27th Avenue

Miami, Florida 33133

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Carlos M. Machado, Esq.
Mesa, Rodriguez & Machado, P.A.
1000 Brickell Avenue, Suite 660
Miami, Florida 33131

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 board of directors or by an officer so authorized by the board.


(Signature of an officer, chairman or vice chairman of the board)

9/15/97
(Date)

Jorge L. Barinaga, President

(Printed or typed name and title)

9/15/97
(Date)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.


(Signature of Registered Agent)

9/15/97
(Date)

If signing on behalf of an entity:

Carlos M. Machado
(Typed or Printed Name)

(Capacity)

CR2E045(4/93)

FAX AUDIT NO. H970000152649

Prepared by: Albert J. Xiquez, Esq.
Mesa, Rodriguez & Machado, PA
1000 Brickell Avenue, Suite 660
Miami, FL 33131
FL BAR NO. 948217

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