Raque	tor's Name	HO				
Address			2000027834223 -02/22/9901129013 ****105.00 ******52.50			
City/State/Zip			Office Use O	ıly	·	
1	ME(S) & DOCUMENT	'NUMBER(S), (if known):			
(Corporat	ion Name)	(Document	#)			
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_	ion Name)	(Document		99 T 31.08 7).11.08	······································	
4(Corporat	ion Name)	(Document	#)	B22 PM		
	Pick up time Will wait Photos		Certified Copy Certificate of Statu	REFERENCE OF THE PROPERTY OF T	J	
NEW FILINGS	AMENDMENTS					
Profit	Amendment					
NonProfit	Resignation of R.A., Office	r/Director			- · 	
Limited Liability	Change of Registered Ager	nt		·		
Domestication	Dissolution/Withdrawal		20000	27834	223	
Other	Merger		-U2/ ***	22/99011 *105.00 *	29013 ****35.00	
OTHER FILINGS Annual Report	REGISTRATION QUALIFICATION Foreign	·······	,	-		
Fictitious Name	Limited Partnership		OH	10 1 A		
Name Reservation	Reinstatement	$ \downarrow$		2 W 99		
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CR2E031(1/95)			Examiner's Initials			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of Sections 607.0502, 617.0502, 607.1508 and 617.1508 Statutes, the undersigned corporation, organized under 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: Florida No-Fault Premium Finance, Inc.
- 1a. Date of incorporation: April 28, 1988 Document No.: M79204
- The name and address of the present registered agent and office:

Roger G. Wolf 2755 N.W. 63rd Court Ft. Lauderdale, FL 33309

The name and address of the successor registered agent and of

Wesley A. Lauer Arnstein & Lehr 515 N. Flagler Drive, Suite 600 West Palm Beach, FL 33401

Such change was authorized by resolution duly adopted by its board of directors.

SIGNATURE LIKE G WO N

(President) or Vice President)

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE. I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

/D--:

(Registered Agent)

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