

M 92985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

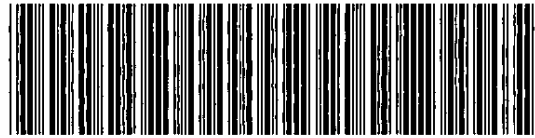
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RD Change  
Tells  
7-30-08

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Fiorella Insurance Agency, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** M92985

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:

Nick Fiorella  
(Name of Contact Person)

Fiorella Insurance Agency, Inc.  
(Firm/Company)

515 SE Central Parkway  
(Address)

Stuart, FL 34994  
(City/State and Zip Code)

For further information concerning this matter, please call:

Nick Fiorella at ( 772 ) 349-1158  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

**Mailing Address:**  
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

**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: Fiorella Insurance Agency, Inc.
- 2. The principal office address: 515 SE Central Parkway  
Stuart, FL 34994
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 8-08-88 Document number: M92985
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Nick Fiorella  
731 SW Pinetree Lane  
Palm City, FL 34990

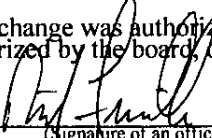
- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Nick Fiorella  
1410 NW Fork Rd  
(P.O. Box NOT acceptable)  
Stuart, FL 34994

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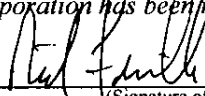
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
 \_\_\_\_\_  
(Signature of an officer or director)

Nick Fiorella  
 \_\_\_\_\_  
(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.*

  
 \_\_\_\_\_  
(Signature of Registered Agent)

07-21-2008  
 \_\_\_\_\_  
(Date)

If signing on behalf of an entity:

Nick Fiorella  
 \_\_\_\_\_  
(Typed or Printed Name)

**\*\*\* FILING FEE: \$35.00 \*\*\***

07-21-2008

Florida Department of State  
Divisions of Corp.

Re: Address change for Officer/Director

Fiorella Insurance Agency Inc.  
M92985

Address change for 2 Officer/Directors

OLD  
Nick Fiorella  
731 SW Pinetree Lane  
Palm City, FL 34990

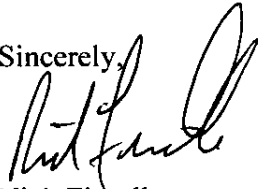
OLD  
Sharon Fiorella  
731 SW Pinetree Lane  
Palm City, FL 34990

New address for both is now

1410 NW Fork Road  
Stuart, FL 34994

Call me or email should you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Nick Fiorella", written over the word "Sincerely,".

Nick Fiorella