Karen Harris Insurance Agency, P.A. 1636 North Central Avenue Sebastian, Florida 32958

100005785411--8

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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(Corporation Name)	(Document #)	.
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(Corporation Name)	(Document #)	-
3. (Corporation Name)	(Document #)	ē
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(Corporation Name)	(Document #)	
Walk in Pick up tin	ne Certified Copy	
☐ Mail out ☐ Will wait	Photocopy Certificate of Status	
NEW FILINGS	-AMENDMENTS	
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	2
☐ Annual Report ☐ Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	
R2E031(7/97)	Examiner's Initials	

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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: Karen Harris Dosurance Agency, PA.
2. The mailing address of the corporation: 10749 US Highway Schastian Fl 32958
3. Date of incorporation/qualification: 4/4/2000 Document number: Poo 00 035755
4. The name and address of the current registered agent and office:
Karen Harris
1636 N. Contral Aug
Sehastian, F1 32958
5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable)
Karen Harris
10749 US Highway
Seloastian F1 32958
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) (Date)
Karen Harris - President (Printed or typed name and title)
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) (Date)
If signing on behalf of an entity:
(Capacity)
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)