

# 2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000080891

**FILED**  
**Oct 05, 2012**  
**Secretary of State**

**Entity Name:** RED ROAD INSURANCE & SERVICES INC.

**Current Principal Place of Business:**

10113 WEST OKEECHOBEE ROAD  
HIALEAH, FL 33016 US

**New Principal Place of Business:**

**Current Mailing Address:**

10113 WEST OKEECHOBEE ROAD  
HIALEAH, FL 33016 US

**New Mailing Address:**

FEI Number: 37-1424376

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RODRIGUEZ, SONIA  
7466 NW 179 TERRACE  
HIALEAH, FL 33015 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SONIA RODRIGUEZ

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: RODRIGUEZ, SONIA  
Address: 10113 WEST OKEECHOBEE ROAD  
City-St-Zip: HIALEAH, FL 33016 UN

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SONIA RODRIGUEZ

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PD

10/05/2012

\_\_\_\_\_  
Date