

P01000006113

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300041940533

12/15/04--01059--025 **1400.00

FILED

04 DEC 15 PM 4:16

SECRETARY OF STATE
TALLAHASSEE, FL 32304

RECEIVED

04 DEC 15 PM 3:04

CLERK OF SUPERIOR COURT
TALLAHASSEE, FL 32304

P.A. Chavez

~~Q. Gonzalez~~ DEC 16 2004

CT Corporation System

660 E. Jefferson St., Tallahassee, FL, 32301

850-222-1092

Lennar Insurance Services, Inc.

☐ Profit☐ Amendment☐ Merger☐ Nonprofit☐ Foreign☐ Dissolution/Withdrawal☐ Mark☐ Reinstatement☐ Limited Partnership☐ Annual Report☐ Other☐ LLC☐ Name Registration☒ Change of RA☐ Fictitious Name☐ UCC☐ Certified Copy☐ Photocopies☐ CUS☐ Call When Ready☐ Call If Problem☐ After 4:30☒ Walk In☐ Will Wait☒ Pick Up☐ Mail Out

Name

12/14/2004

Order#: 6244755

Availability

Document

AAM

Examiner

Ref#:

Updater

Verifier

W.P. Verifier

Amount: \$

**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: Lennar Insurance Services, Inc.
2. The principal office address: 700 NW 107th Avenue, Suite 400, Miami, FL 33172
3. The mailing address (if different): 700 NW 107th Avenue, Suite 400, Miami, FL 33172
4. Date of incorporation/qualification: 01/17/2001 Document number: P01000006113
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Benjamin P. Butterfield, Esq.

700 NW 107th Avenue, Suite 400

Miami, FL 33172

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

C T Corporation System

c/o C T Corporation System

(P.O. Box or personal mailbox NOT acceptable)

1200 South Pine Island Road, Plantation, Florida 33324

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.

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

Janice Munoz
Vice President/Treasurer
(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.

C T Corporation System

By: Connie Bryan
(Signature of Registered Agent)

12/13/04
(Date)

If signing on behalf of an entity:

CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY

(Typed or Printed Name)

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314