

P01000P98760

Requester's Name



Southeast Regional Office
5600 NW 102ND AVE., SUITE J
SUNRISE, FLORIDA 33351

100004738761--7
-12/26/01--01053--015
*****35.00 *****35.00

Office Use Only

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

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- | | | |
|------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Walk in | <input type="checkbox"/> Pick up time | <input type="checkbox"/> Certified Copy |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait | <input type="checkbox"/> Certificate of Status |
| <input type="checkbox"/> Photocopy | | |

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

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RA CM
28012-26-01

Examiner's Initials

**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 : UNITED INSURANCE MARKETING CORPORATION

2. The mailing address of the corporation : 5600 NW 102 AVE, SUITE J
SUNRISE FL 33351

3. Date of incorporation/qualification: OCTOBER 10, 2001 Document number: PD1000098760

4. The name and address of the current registered agent and office:

FILINGS, INC.
3732 NW 16 STREET
FORT LAUDERDALE, FL 33311

5. The name and address of the new registered agent (if changed) and/or registered office (if changed)
(P. O. Box Not Acceptable)

RONALD GRESS
5600 NW 102 AVE, SUITE J
SUNRISE, FL 33351

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

12/18/01
(Date)

RONALD GRESS 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]
(Signature of Registered Agent)

12/18/01
(Date)

If signing on behalf of an entity:

RONALD GRESS
(Typed or Printed Name)

REGISTERED AGENT
(Capacity)

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

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