

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000054666

FILED
Jul 20, 2011
Secretary of State

Entity Name: HEALTH INSURANCE SERVICES OF S.W. FLORIDA, INC.

Current Principal Place of Business:

1213 S.W. 27TH STREET
CAPE CORAL, FL 33914 US

New Principal Place of Business:

4091 COLONIAL BLVD
SUITE 100
CAPE CORAL, FL 33914 US

Current Mailing Address:

1213 S.W. 27TH STREET
CAPE CORAL, FL 33914 US

New Mailing Address:

1213 S.W. 27 STREET
CAPE CORAL, FL 33914

FEI Number: 01-0711964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENSTEIN, BRUCE C
1213 S.W. 27TH STREET
CAPE CORAL, FL 33914 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: BRUCE C GREENSTEIN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPST
Name: GREENSTEIN, BRUCE C
Address: 1213 S.W. 27TH STREET
City-St-Zip: CAPE CORAL, FL 33914

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: BRUCE C GREENSTEIN

DPST

07/20/2011

Electronic Signature of Signing Officer or Director

Date