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SECRETARY OF STATE
ALLAHASSES

R.A. Change

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Folsom Insurance Consultants Inc (Name of corporation)
DOCUMENT NUMBER:
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Thomas L. Folson III (Name of contact person) Folson Insurance Tonsultants Inc (Firm/Company)
8031 Lantern Light Rd
Tallahassee FC 323/2 (City/state and zip code)
For further information concerning this matter, please call:
Thomas L. Folcom TD at (850) 550-3642 (Name of contact person) (Area code & daytime telephone number)
(Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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 Floridain order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Folsom Insurance Consultants, Inc.
2. The principal office address: 8031 Lantern Light Road Tallahassee FC 32312
3. The mailing address (if different):
4. Date of incorporation/qualification: 7/22/03 Document number: 103000080268
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Thomas L. Folson III
1833 Halsfeod Blvd #908
Tallalassee PC 32309 Es 3
6. The name and street address of the new registered agent (if changed) and /or registered office Thomas L. Folson TV So31 banten Light Rd (P.O. Box NOT acceptable) Tallahassee FL 32312
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. Honas I tolson The (Signature of an other or director) (Signature of an other or director)
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.
Monas 1' bloom 477 9/2/04 (Signature of Registered Agent) (Date)
If signing on behalf of an entity:

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

(Typed or Printed Name)