

P04000086344

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

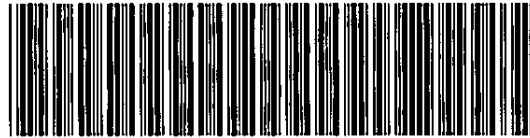
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800286931928

06/27/16--01018--009 **35.00

2016 JUN 27 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

JUN 30 2016

C. CARROTHERS



CORPORATION SERVICE COMPANY

CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: June 23, 2016

Order#: 150666/001

Re: FCHCN INSURANCE AGENCY, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Lockard
c/o Corporation Service Company
2711 Centerville Road, Suite 400
Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FCHCN INSURANCE AGENCY, INC.
2. The principal office address: 3333 W Commercial Blvd., Suite 103, Ft. Lauderdale, FL 33309
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 06/02/2004 Document number: P04000086344

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CT Corporation System
1200 South Pin Island Road
Plantation FL 33324

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

Corporation Service Company
1201 Hays Street
Tallahassee FL 32301
P.O. Box NOT acceptable

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.

Joel Slakman
Signature of an officer or director

Joel Slakman President
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.

Corporation Service Company
By: Lindsey M. Lockard
Signature of Registered Agent

06/23/2016
Date

If signing on behalf of an entity:

Lindsey M. Lockard, Asst. Vice President
Typed or Printed Name

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

2016 JUN 27 PM 12: 22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED