2014 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Feb 10, 2014
Secretary of State

DOCUMENT# P05000046246

Entity Name: JERRY HILL INSURANCE, INC.

Current Principal Place of Business:

215 N.E. 210TH AVENUE
CROSS CITY, FL 32628

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 830
CROSS CITY, FL 32628

New Mailing Address:

FEI Number: 52-2457807 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COBB, CARRIE H
215 N.E. 210TH AVENUE
CROSS CITY, FL 32628 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: FAITH HILL

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PST
Name: HILL, FAITH H
Address: 215 N.E. 210TH AVENUE
City-St-Zip: CROSS CITY, FL 32628

Title: VP
Name: COBB, CARRIE
Address: 215 NW 210TH AVE
City-St-Zip: CROSS CITY, FL 32628/

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: FAITH HILL PST 02/10/2014

Electronic Signature of Signing Officer or Director Date