

P05000167661

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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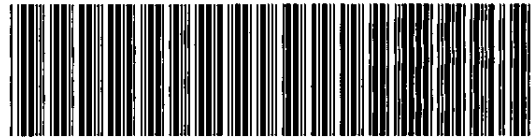
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

Roberts NOV 04 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Floridian Coastline Insurance Inc. /
Name of Corporation

DOCUMENT NUMBER: P05000167661 /

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:

Juan Carlos Cruz
Name of Contact Person

Floridian Coastline Group
Firm/Company

2450 E Commercial Boulevard Suite 203
Address

Fort Lauderdale, Florida 33308
City/State and Zip Code

jccruz@floridiancoastline.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan Carlos Cruz at (561) 302-5771
Name of Contact Person 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

1. The name of the corporation: Floridian Coastline Insurance Inc.
2. The principal office address: 2450 E Commercial Boulevard Suite 203
Fort Lauderdale, Florida 33308
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/29/2005 ✓ Document number: P05000167661 ✓

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)

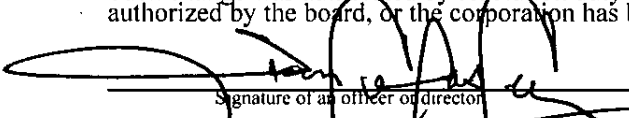
Floridian Coastline Group Inc.
1591 East Atlantic Boulevard Suite 100
Pompano Beach, Florida 33060

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

Floridian Coastline Group Inc.
2450 E Commercial Boulevard Suite 203
P.O. Box NOT acceptable
Fort Lauderdale, Florida 33308

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.


Signature of an officer or director

Juan Carlos Cruz - 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.


Signature of Registered Agent

October 28th, 2010
Date

If signing on behalf of an entity:

JUAN CARLOS CRUZ
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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NOV - 2 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA