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| Certified Copies | Certificates of | Status |
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| Special Instructions t | o Filing Officer: | |
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· CORPORATE ACCESS, _

When you need ACCESS to the world

INC.

236 East 6th Avenue, Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

| | WALK IN | | | | | |
|-----------------------|---------|--|---------------------------------------|--|--|--|
| | | PICK UP: | 04/23/2019 | APR 23 F | | |
| | | CERTIFIED COPY | | <u> </u> | | |
| | хх | РНОТОСОРУ | | ٠; <u>٠</u> ٠ <u>٠</u> <u>٠</u> | | |
| | | CUS | | | | |
| | хх | FILING | AMENDMENT | | | |
| 1. | | 5 STAR LIFE INSURANCE C (CORPORATE NAME AND DOCUMENT # | | <u>. </u> | | |
| 2. | | (CORPORATE NAME AND DOCUMENT # |) | | | |
| 3. | | (CORPORATE NAME AND DOCUMENT# | | | | |
| 4. | | (CORPORATE NAME AND DOCUMENT #) | · · · · · · · · · · · · · · · · · · · | | | |
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| SPECIAL INSTRUCTIONS: | | | | | | |
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| Prosuant to the provisions of sections 607,0502, 617,0502, 607,1508, or 617,1508, Florida Statement of change is submitted for a corporation organized under the laws of the State of \Box | | | | |
|--|--|--|--|--|
| in order to change its registered office or registered agent, or both, in the State of Fl | ^l orida, | | | |
| 1. The name of the corporation: 5 STAR LIFE INSURANCE COMPANY | | | | |
| 2. The principal office address: 909 N. Washington Street, Alexandria, VA 2 | <u>22314</u> | | | |
| 3. The mailing address (if different): | · | | | |
| 4. Date of incorporation/qualification: December 8, 2000 Document number: P05576 | 3 | | | |
| 5. The name and street address of the current registered agent and registered office on file wit Florida Department of State; (If resigned, enter resigned) | h the | | | |
| Edwin F. Blanton, Esq. | | | | |
| 610 Summerbrooks Drive | | | | |
| Tallahassee, FL 32312 | TO POST OF THE POS | | | |
| Tallahassee, FL 32312 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Corporate Access. Inc. | | | | |
| Corporate Access. Inc. | , | | | |
| 236 East 6th Avenue | 2 E | | | |
| Tallahassee, FL 32303 | a | | | |
| The street address of its registered office and the street address of the business office of its as changed will be identical. | registered agent. | | | |
| Such change was authorized by resolution duly adopted by its board of directors or by an o authorized by the board, or the corporation has been notified in writing of the change. | fficer so | | | |
| Manual R Chair Str. Manual R Chair Str. Signature of in other of director Printed or typed name and title | 1 Garel Gusel | | | |
| I hereby accept the appointment as registered agent and agree to act in this capacity. I jurther agree to comply with the provisions of all statutes relative to the proper and comperformance of my duties, and I am familiar with and accept the obligation of my position agent. Or, if this document is being filed merely to reflect a change in the registered office hereby confirm that the corporation has been notified in writing of this change. | olete as registered address, I | | | |
| Signator of Registered Agent Date | 119 | | | |
| If signing on behalf of an entity: Danny Benneth | | | | |

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