

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000022013

FILED
Apr 19, 2011
Secretary of State

Entity Name: TRI - COUNTY CERTIFIED INSURANCE ADJUSTERS CORP

Current Principal Place of Business:

7115 SW 162 PATH
MIAMI, FL 33193

New Principal Place of Business:

12805 SW 76 TER
MIAMI, FL 33183

Current Mailing Address:

PO BOX 442149
MIAMI, FL 33144

New Mailing Address:

FEI Number: 20-4343654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REYNALDO, ALVARAEZ
7115 SW 162 PATH
MIAMI, FL 33193 US

Name and Address of New Registered Agent:

ALVAREZ, REYNALDO
12805 SW 76 TER
MIAMI, FL 33183 US

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: REYNALDO ALVAREZ

04/19/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ALVAREZ, REYNALDO
Address: 12805 SW 76 TER
City-St-Zip: MIAMI, FL 33183

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: REYNALDO ALVAREZ

PD

04/19/2011

Electronic Signature of Signing Officer or Director

Date