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PICK-UP	☐ WAIT	MAIL
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(D	ocument Number)	
Certified Copies	Certificates of Status	
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SECRETARY OF STATE
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APPROVED AND FILED

R.A. Charge



Nancy C. Haire Corporate Paralegal & Assistant Secretary

11101 Roosevelt Blvd N

St. Petersburg, FL 33716

Toll Free: (800) 627-0000 x. 4417

Telephone: (727) 823-4000 x. 4417

Facsimile: (727) 823-6518

nhaire@bankersinsurance.com

www.bankersinsurance.com

SENT BY UPS OVERNIGHT DELIVERY

December 14, 2007

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Statement of Change of Registered Agent

Dear Sir or Madam:

Enclosed please find Statements of Change of Registered Agent for the 44 corporations listed on the attached exhibit, together with a check in the amount of \$1,540.00 representing a \$35.00 filing fee for each company.

If you have any questions or concerns, please contact me.

Very truly yours,

Nancy C. Harre

NCH/s Enclosures

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.0502, 607.0502, 617.050	under the laws of the State of Florida	
1. The name of the corporation: BANKERS EMPLOYER SERV	VICES I, INC.	
2. The principal office address: 11101 Roosevelt Boulevard N		
St. Petersburg, Florida 33		
3. The mailing address (if different):		
4. Date of incorporation/qualification: 06/15/06	Document number: P06000082208	
5. The name and street address of the current registered agent a Florida Department of State:	and registered office on file with the	
Nancy C. Haire		
360 Central Ave.		
St. Petersburg, FL 33701	· · · · · · · · · · · · · · · · · · ·	
6. The name and street address of the new registered agent (if changed):	EC EC	-
Nancy C. Haire		FILE
11101 Roosevelt Boulevard N, 4th		<u>'</u>
(P.O. Box NOT acceptable)	Floor, Legal Dept. STATE 22	
St. Petersburg, FL 33716		
The street address of its registered office and the street address changed will be identical.	ess of the business office of its registered agent,	
Such change was authorized by resolution duly adopted by is authorized by the board, or the corporation has been notified	its board of directors or by an officer so d in writing of the change.	
(Signature of an officer or director) Na	ancy C. Haire, Asst. Secretary (Printed or typed name and title)	
I hereby accept the appointment as registered agent and aging in further agree to comply with the provisions of all statutes to find duties, and I am familiar with and accept the obligation document is being filed merely to reflect a change in the register corporation has been notified in writing of this change.	relative to the proper and complete performance on of my position as registered agent. Or, if this	
Parcel Have De	ecember 12, 2007	
(Signature of Registered Agent)	(Date)	
If signing on behalf of an entity:		
Nancy C. Haire		
(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