Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850)617-6380

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Account Name

: C T CORPORATION SYSTEM

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Fax Number

(954) 208-0845

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REGISTERED AGENT CHANGE USWC INSTALLMENT PROGRAM, INC.

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MAR 0 8 2017 C MCNAIR

COVER LETTER

TO:	Amendment Section Division of Corporation

USWC INSTALLMENT PROGRAM, INC. Name of Corporation P07000029557 DOCUMENT NUMBER: 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: Karen Barger Name of Contact Person Protective Life Corporation Firm/Company 2801 Highway 280 South, 3-4 LE Address Birmingham, AL 35223 City/State and Zip Code malcazar@uswarranty.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Karen Barger 268-3061

Enclosed is a \$35.00 check made payable to the Department of State.

Name of Contact Person

Mailing Address: Amendment Section Street Address: Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Area Code & Daytime Telephone Number

CR2E045 (03/12)

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

statement of ch	nange is submitted for a corporation orga	u2, 607.1508, or 617.1508, Plorida Statutes, this mised under the laws of the State of Florida tered agent, or both, in the State of Florida.	
	the corporation: USWC INSTALLMENT		
	no change		
3. The mailing	address (if different): no change		······································
4. Date of incom	poration/qualification: 03/06/2007	Document number: P07000029557	
	d street address of the current registered a rtment of State: (If resigned, enter resign	agent and registered office on file with the ed)	
	BERTOLINI, MICHELLE S		
	3720 COCONUT CREEK PARKWAY, S	UITE D,	
	COCONUT CREEK, FL 33322		
6. The name and (if changed):	d street address of the new registered age		OISIVIC 1038
	C T Corporation System	MAR -7	REAL TO
	c/o C T Corporation System, 1200 South Pine Island Road		
P.O. Box NOT acceptable Plantation, Florida 33324		acceptable	50
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its registered agent,	3
Such change was authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been no	by its board of directors or by an officer so iffied in writing of the change.	
J. lici	re of an officer or director	Felicia M. Lee, Assistant Secretary	
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent and to comply with the provisions of all state my duties, and I am familiar with and a state of the corporation has been notified in the corporation has been notified in	d agree to act in this capacity. the relative to the proper and complete coept the obligation of my position as registered act a change in the registered office address, I writing of this change.	
By:	gration System	3/7/2017	
-	inture of Registored Agent	Date	
If signing on bel	half of an entity:		

Alfred Younan
Assistant Secretary
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 (03/12)