

P07000029557

Florida Department of State
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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**REGISTERED AGENT CHANGE
USWC INSTALLMENT PROGRAM, INC.**

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: USWC INSTALLMENT PROGRAM, INC.
Name of Corporation

DOCUMENT NUMBER: P07000029557

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 at (205) 268-3061
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

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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: USWC INSTALLMENT PROGRAM, INC.

2. The principal office address: no change

3. The mailing address (if different): no change

4. Date of incorporation/qualification: 03/06/2007 Document number: P07000029557

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)

BERTOLINI, MICHELLE S
3720 COCONUT CREEK PARKWAY, SUITE D,
COCONUT CREEK, FL 33322

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

C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
Plantation, Florida 33324
P.O. Box NOT acceptable

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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.

Felicia M. Lee
Signature of an officer or director

Felicia M. Lee, Assistant Secretary
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.

By: C T Corporation System
Signature of Registered Agent

3/7/2017
Date

If signing on behalf of an entity:

Alfred Younan
Typed or Printed Name
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

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