2013 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Mar 06, 2013
Secretary of State

DOCUMENT# P08000020822

Entity Name: DIVERSIFIED INSURANCE INC.

Current Principal Place of Business:

3842 SW. COQUINA COVE WAY
207
PALM CITY, FL 34990

New Principal Place of Business:

654 ROUTE 88
SUITE 4
POINT PLEASANT, NJ 08742

Current Mailing Address:

3842 SW. COQUINA COVE WAY
207
PALM CITY, FL 34990

New Mailing Address:

654 ROUTE 88
SUITE 4
POINT PLEASANT, NJ 08742

FEI Number: 42-1758633 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRENNAN, RAYMOND C
3842 SW. COQUINA COVE WAY207
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

BRENNAN, RAYMOND C
1766 CAPTAINS PLACE
PALM CITY, FL 34990 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: RAYMOND BRENNAN 03/06/2013
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D/P
Name: BRENNAN, RAYMOND
Address: 654 ROUTE 88 SUITE 4
City-St-Zip: POINT PLEASANT, NJ 08742

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: RAYMOND BRENNAN PRES 03/06/2013
Electronic Signature of Signing Officer or Director Date