P08000055660

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(Requestor's Name)					
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PICK-UP	WAIT	MAIL			
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Special Instructions to Fi	ling Officer:				
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Office Use Only



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Miller

COVER LETTER

TO: Amendmen Division of	nt Section f Corporations				
SUBJECT: Acelerant, Inc.					
	Name of Corp	oration			
DOCUMENT NU	MBER: P0800	0055660			
The enclosed State	ment of Change of Registered Office/A	gent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:					
	Ray Lore	nzo			
	Name of Contact	ct Person			
Acelerant, Inc.					
	Firm/Com				
	12 Marina Gard				
	Addres	S			
	Palm Reach Garde	ne Fl 33410			
	Palm Beach Garde City/State and 2	Zip Code			
-	rlorenzo@acele E-mail address: (to be used for futu	rant.com			
	D man address. (to ob asea to rate				
For further information	ation concerning this matter, please call	:			
	Ray Lorenzo	, son 257, 9461			
Na	me of Contact Person	at (800) 257. 946/ Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.					
	Mailing Address: Amendment Section	Street Address: Amendment Section			
	Division of Corporations	Division of Corporations			
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle			
	141141140000, 1 15 5251	Tallahassee, FL 32301			

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

statement of cha	nge is submitted for a c	corporation organized	07.1508, or 617.1508, Flow under the laws of the Stat agent, or both, in the State	_{e of} Florida	
		,,	ageni, or voin, in the state	e oj rioriaa.	
The name of the corporation: Acelerant, Inc. The principal office address: 12 Marina Gardens Drive, Palm Beach, FL 33410					
2. The principal	office datess.	,			
3. The mailing a	ddress (if different):				
4. Date of incorp	ooration/qualification: _	06/04/2008	Document number:	P08000055660	
	street address of the content of State: (If resign		and registered office on fi	le with the	
	CT Corporation S	ystem		09 SEC SALL	
	1200 South Pine			PN C	
	Plantation, FL 33	324		IL E	
6. The name and (if changed):	street address of the n	ew registered agent (if	changed) and /or registered	ed office ORIDI	
	Ray Lorenzo			<u>~</u> ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
_ <u>ય</u>	12 Marina Garder	ns Drive P.O. Box NOT acco	matable.		
	Palm Beach, FL				
The street addre	ess of its registered off be identical.	ice and the street add	ress of the business office	e of its registered agent,	
-			its board of directors or led in writing of the chang		
Signatur	e of an officer or director		Ray Lorenzo,	President	
I haraby accept	the appointment as re	gistered agent and ag visions of all statutes nd accept the obligat ect a change in the re ng of this change.	ree to act in this capacity relative to the proper an ion of my position as regi gistered office address, I		
1			blu	09	
Sign	nature of Registered Agent		Date		
If signing on be	half of an entity:				
, ,		·			
T	ped or Printed Name	_			

* * * FILING FEE: \$35.00 * * *