## 2012 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P10000088181

Entity Name: ALLIED INSURANCE INC.

FILED Nov 26, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2004 POLK ST

HOLLYWOOD, FL 33020

Current Mailing Address: New Mailing Address:

1939 TYLER ST HOLLYWOOD, FL 33020

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOODY, TOM 1939 TYLER ST

HOLLYWOOD, FL 33020 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: TOM MOODY

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title:

Name: MOODY, TOM Address: 1939TYLER ST

City-St-Zip: HOLLYWOOD, FL 33020 US

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: TOM MOODY PRES 11/26/2012