P11000055243

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE
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MAR 1 7 2014 C. CARROTHERS

COVER LETTER'

TO: Amendment Section

Division of Corporations

SUBJECT: Insure & GO Insurance Services USA Corp.

Name of Corporation

DOCUMENT NUMBER, P11000055243

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:

David Arola, Licensing& Compliance

Name of Contact Person

Brickell Financial Services-Motor Club, Inc.

Firm/Company

7300 Corporate Center Dr. Suite 601

Address

Miami, FL 33126

City/State and Zip Code

darola@road-america.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

M. Mick

_{at} 305

392-4404

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

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

•	visions of sections 607.0502, 617.050. e is submitted for a corporation organ		
in order to	change its registered office or registe	ered agent, or both, in the State	of Florida.
	corporation: Insure & Go Insura		
2. The principal off	ice address: 7300 Corporate Ce	enter Drive, Suite 601	Miami, FL 33126
3. The mailing add	ress (if different):		
4. Date of incorpora	ation/qualification: 06/13/2011	Document number: P1	1000055243
5. The name and str	reet address of the current registered a ent of State: (If resigned, enter resigne	-	le with the
<u>C</u>	orporation Service Compan	у	
<u>1</u>	201 Hays Street		
<u>T</u> :	allahassee, FL 32301		
6. The name and str (if changed):	reet address of the new registered ager	nt (if changed) and /or registere	TAPLAN TA
D	avid Arola, Legal Dept.		ASSI = T
7	300 Corporate Center Drive	-	
<u>M</u>	P.O. Box NOT liami, FL 33126	acceptable	AM 10: 06 CF STAIL E, FLORIDA
The street address as changed will be	of its registered office and the street a identical.	address of the business office	of its registered agent,
Such change was a authorized by the b	uthorized by resolution duly adopted oard, or the corporation has been not	by its board of directors or by iffied in writing of the change.	an officer so
Dennis M. Fantis, President Signature of an officer or director Printed or typed name and title			
I hereby accept the I further agree to a performance of my	e appointment as registered agent and comply with the provisions of all state duties, and I am familiar with and a locument is being fited merely to refle at the comporation had been notified in	d agree to act in this capacity. Ites relative to the proper and ccept the obligation of my pos	complete ition as registered
		March 7, 2014	
	re of stegistered Agent	Date	
If signing on behal	f of an entity:		
Турес	or Printed Name		