

2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P11000062683

FILED
Feb 04, 2013
Secretary of State

Entity Name: SERVICING INSURANCE, INC.

Current Principal Place of Business:

2630 SW MERRICK STREET
PORT ST LUCIE, FL 34953

New Principal Place of Business:

3901 SW KAMSLER ST
PORT ST LUCIE, FL 34953

Current Mailing Address:

2630 SW MERRICK STREET
PORT ST LUCIE, FL 34953

New Mailing Address:

3901 SW KAMSLER ST
PORT ST LUCIE, FL 34953

FEI Number: 45-2725754

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARENTE, SONIA
2630 SW MERRICK STREET
PORT ST LUCIE, FL 34953 US

Name and Address of New Registered Agent:

SALEM, SONIA
3901 SW KAMSLER ST
PORT ST LUCIE, FL 34953 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: SONIA SALEM

02/04/2013

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: SALEM, SONIA
Address: 3901 SW KAMSLER STREET
City-St-Zip: PORT ST LUCIE, FL 34953

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: SONIA SALEM

PD

02/04/2013

Electronic Signature of Signing Officer or Director

Date