

P14000080811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

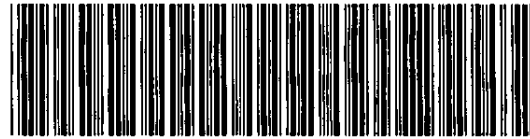
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100265398321

10/14/14--01002--020 \*\*35.00

OCT 28 2014  
T. CARTER

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
14 OCT 14 PM 2:26

PA/RD Change

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Brown Insurance Group Inc  
Name of Corporation

**DOCUMENT NUMBER:** P14000080811

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 Brown

Name of Contact Person

Brown Insurance Group Inc

Firm/Company

423 Archaic Dr

Address

Winter Haven FL 33880

City/State and Zip Code

Express1040inc@yahoo.com

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

For further information concerning this matter, please call:

Pamela A Green

Name of Contact Person

at ( 863 ) 293-1413

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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Brown Insurance Group, Inc.
2. The principal office address: 423 Archaic Dr  
Winter Haven FL 33880
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/01/2014 Document number: P14000080811
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

United States Corporation Agents Inc

13302 Winding Oaks Court, Suite A

Tampa FL 33612

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Express 1040 Inc

319 3rd St. NW


P.O. Box NOT acceptable

Winter Haven FL 33881

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
14 OCT 14 PM 2:26

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

David Brown, PTSD

Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
Signature of Registered Agent

October 6, 2014

Date

If signing on behalf of an entity:

Pamela A Green

Typed or Printed Name

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