2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P26183

FILED Oct 20, 2004 Secretary of State

Entity Name: INTERMARE AGENCY SERVICES, INC. **Current Principal Place of Business: New Principal Place of Business:** 100 ALPHA DRIVE, SUITE 118 DESTREHAN, LA 700479425 **Current Mailing Address: New Mailing Address:** 100 ALPHA DRIVE, SUITE 118 DESTREHAN, LA 700479425 FEI Number: 72-0910492 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PRENTICE-HALL CORPORATION SYSTEM, INC. WEBER, RONALD 1201 HAYS ST., SUITE 105 TALLAHASSEE, FL 32301 6101 PORT TAMPA DRIVE TAMPA, FL 33616 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: RONALD WEBER 10/20/2004 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition LEECH, STEPHEN F., Name: Name: 100 ALPHA DRIVE Address: Address: City-St-Zip: DESTREHAN, LA City-St-Zip: Title: VPD () Delete Title: () Change () Addition Name: HINKEL. JEAN-DENIS. Name: 8300 NORMAN DR., SUITE 1180 Address: Address: MINNEAPOLIS, MN 55437 City-St-Zip: City-St-Zip: () Delete Title: Title: SD () Change () Addition KAHN, ANTHONY C., Name: Name: 200 PARK AVE. Address: Address: City-St-Zip: NEW YORK, NY City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEPHEN FLEECH PTD 10/20/2004