

P95000021012

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

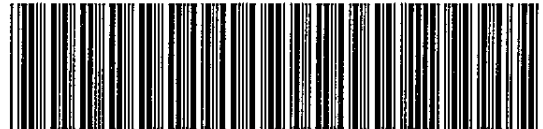
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## Inc. Plan (USA)

Trolley Square, Suite 26C  
Wilmington, DE 19806

Telephone (800) 462-4633 • (302) 428-1200 • Fax (302) 428-1274

email: [info@incplan.net](mailto:info@incplan.net)

[www.incplan.net](http://www.incplan.net)

December 19, 2002

Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Dear Department of State:

Enclosed please find an original and one copy of the Statement of Change of Registered Office or Registered Agent or Both for Family Benefits, Inc.

I am also a check for \$35.00 for the filing fee.  
Please return one copy of the filed document to:

Caroline Quigley  
Inc. Plan (USA)  
Trolley Square, Ste. 26C  
Wilmington, DE 19806

If there are any problems with the filing please call me at 1-800-462-4633.

Thank you for your help in this matter.

Sincerely,

  
Caroline Quigley

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: FAMILY BENEFITS, INC.

2. The principal office address: 401 N.E. Mizner Blvd., T-202, Boca Raton, FL 33432

3. The mailing address (if different): P.O. Box 2441, Newport Beach, CA 92659

4. Date of incorporation/qualification: 10/21/1998 Document number: P95000021012

5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State:

Estelle M. Sheldon

1900 Oakdale Lane South

Clearwater, FL 33764

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

Dijon Bellemare

401 N.E. Mizner Blvd., T-202

(P.O. Box or personal mailbox NOT acceptable)

Boca Raton, FL 33432

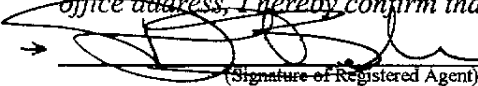
The street address of its registered office and the street address of the business office of its registered  
agent, as changed will be identical.

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.

Estelle M. Sheldon - President  
(Signature of an officer, chairman or vice chairman of the board)

Estelle M. Sheldon - President  
(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)

\_\_\_\_\_  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:  
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA