

P960000027088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

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Change

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05 NOV 14 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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05 NOV 14 PM 12:40
CORPORATIONS
TALLAHASSEE, FLORIDA

DR
11/15/05

SPIEGEL & UTRERA, P.A.

(Requestor's Name)

1840 CORAL WAY, 4TH FLOOR

(Address)

MIAMI, FL 33145 (305) 854-6000

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. MORNINGSTAR INSURANCE CORPORATION - P96000027088
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒

Walk in

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Certified Copy

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Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Resignation of R.A., Officer/Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials	
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STATEMENT OF CHANGE OF FILED

REGISTERED OFFICE OR

REGISTERED AGENT

OF

MORNINGSTAR INSURANCE CORPORATION

05 NOV 14 PM 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502, 617.0502, 617.1508 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.

FIRST: The name of the corporation MORNINGSTAR INSURANCE CORPORATION.

SECOND: The principal office address of the corporation is 900 Cesery Boulevard, Unit 116, Jacksonville, Florida 32211 and the mailing address is the same.

THIRD: The date of incorporation was the 26th day of March, 1996. The Corporation's document Number is P96000027088.

FOURTH: The name and address of the Registered Agent shall be:

SPIEGEL & UTRERA, P.A.
1840 Southwest 22nd Street
4th Floor
Miami, Florida 33145



SPIEGEL & UTRERA, P.A.
L A W Y E R S

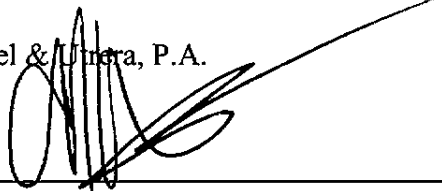
www.amerilawyer.com

1840 CORAL WAY, 4TH FLOOR, MIAMI, FL 33145 - (305) 854-6000 - (800) 603-3900 - FACSIMILE (305) 857-3700
MAILING ADDRESS - POST OFFICE BOX 450605, MIAMI, FL 33245-0605

ACCEPTANCE OF REGISTERED AGENT DESIGNATED
IN STATEMENT OF
CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT

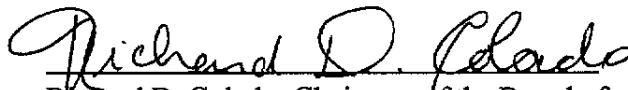
Spiegel & Utrera, P.A., having a business office identical with the registered office of the Corporation name above, and having been designated as the Registered Agent in the above and foregoing Statement of Change of Registered Office or Registered Agent, is familiar with and accepts the obligations of the position of Registered Agent under the applicable provisions of the Florida Statutes.

Spiegel & Utrera, P.A.

By: 
Natalia Utrera, Vice-President

- SIXTH:** The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
- SEVENTH:** 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.
- EIGHTH:** This change shall be effective upon the filing with the Secretary of State of Florida.

Signed this 7 November 2005.


Richard D. Colado, Chairman of the Board of
Directors



SPIEGEL & UTRERA, P.A.
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