2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 04, 2006
Secretary of State

DOCUMENT# P96000062193

Entity Name: ALEVE INSURANCE SERVICES, INC.

Current Principal Place of Business:

752 NE 167 STREET
MIAMI, FL 33162

New Principal Place of Business:

Current Mailing Address:

PO BOX 640526
NORTH MIAMI BCH, FL 33164

New Mailing Address:

FEI Number: 65-0681048 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

ULRICKA, LEBRUN F AGENT
752 NE 167TH STREET
MIAMI, FL 33162 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: ULRICKA LEBRUN 10/04/2006
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:

Title: PD ( ) Delete
Name: LEBRUN, YVES
Address: 12550 BISCAYNE BOULEVARD
City-St-Zip: NORTH MIAMI, FL 33181

Title: S ( ) Delete
Name: LEBRUN, ULRICKA F
Address: 12550 BISCAYNE BOULEVARD
City-St-Zip: NORTH MIAMI, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LEBRUN, YVES
Address: 752 NE 167TH STREET
City-St-Zip: MIAMI, FL 33162

Title: A. (X) Change ( ) Addition
Name: LEBRUN, ULRICKA F
Address: 752 NE 167TH STREET
City-St-Zip: NORTH MIAMI, FL 33162

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ULRICKA LEBRUN A. 10/04/2006
Electronic Signature of Signing Officer or Director Date