

Document Number Only

P96000079045

C T Corporation System

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301

City

State

Zip

Phone

000002466470--8

-03/24/98-01058-020

*****35.00 *****35.00

CORPORATION(S) NAME

Barnett Insurance Services, Inc.

- ☐ Profit ☐ Amendment ☐ Merger
- ☐ NonProfit ☐ Dissolution/Withdrawal ☐ Mark
- ☐ Limited Liability Company ☐ Annual Report ☐ Other
- ☐ Foreign ☐ Reservation ☒ Change of R.A.
- ☐ Limited Partnership ☐ Fictitious Name
- ☐ Limited Liability Partnership ☐ CUS
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John
R. H.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Florida Department of State, Jim Smith, Secretary of State

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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: Barnett Insurance Services, Inc.

1b. Date of Incorporation 9/23/96 Document number P96000079045

2. The name and address of the current registered agent and office:

Gary W. England
50 North Laura Street, Mail Code 099-000-0907, Jacksonville, FL 32202

3. The name and address of the new registered agent and office:
(P.O. Box Not Acceptable)

C T CORPORATION SYSTEM
c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation, Florida 33324

The street address of its registered agent 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.

Mary-Ann Lucas
SIGNATURE
March 3, 1998
DATE

Mary-Ann Lucas
Assistant Secretary
(Type or printed name and title)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

JENNIFER F AULTMAN
ASSISTANT SECRETARY

SIGNATURE BY:

(Registered Agent)

DATE

3-16-98

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-91)

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