

P99000030253

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

FILED
00 OCT 26 PM 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WRI Employers Insurance
Inc.

100003440711--3
-10/26/00--01051--018
1356.25 **43.75

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
☒ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
☒ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

RECEIVED
00 OCT 26 PM 12:35
DIVISION OF CORPORATION

G. COULLETTE OCT 26 2000

Signature _____

Requested by: _____

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

**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: WRI EMPLOYERS INSURANCE, INC.

1b. The mailing address of the corporation is : _____

4200 Wackenhut Dr., #100, Palm Beach Gardens, FL. 33410

1c. Date of incorporation: 4/1/99 Document number: P99 0000 30253

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

Timothy J. Howard

4200 Wackenhut Dr., #100

Palm Beach Gardens, FL 33410-4243

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

F.E. Finizia

4200 Wackenhut Dr., #100

Palm Beach Gardens, FL 33410-4243

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.

Richard R. Wackenhut
(Signature of an officer, chairman or
vice chairman of the board)

10/24/00
(Date)

Richard R. Wackenhut Chairman
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

[Signature]
(Signature of Registered Agent)

10/24/00
(Date)

If signing on behalf of an entity:

F.E. Finizia

(Typed or Printed Name)

(Capacity)

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