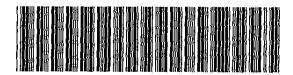
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SECRETARY OF STATE

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C. Coullistte MAY 1 2 2005

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJI	ECT: DADELAND INSURANCE AGENCY, INC. (Name of corporation)
DOCU	MENT NUMBER: P99000051421
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	ROBERT F HARTER, SECRETARY (Name of contact person)
	DADELAND INSURANCE AGENCY, INC. (Firm/Company)
	10943 S DIXIE HWY (Address)
	MIAMI FL 33156-3752
	(City/state and zip code)
For fur	ther information concerning this matter, please call:
ROBE	RT F HARTER, SECRETARY at (305) 728-6801 (Name of contact person) (Area code & daytime telephone number)
	(Name of contact person) (Area code & daytime telephone number)
Enclos	ed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of FLORIDA tered agent, or both, in the State of Florida.	
	the corporation: DADELAND INSURAN	-	
	office address: 10943 S DIXIE HWY; N		
3. The mailing a	address (if different): 10943 S DIXIE HV	VY; MIAMI FL 33156-3752 US	
4. Date of incor	poration/qualification: JUNE 7, 1999	Document number: P99000051421	
	d street address of the current registered artment of State:	agent and registered office on file with the	
	CORPORATION SERVICE COMPAN	Y ZE G	
	1201 HAYS STREET	ALL AND	
	TALLAHASSEE FL 32301-2525	-5 -5	7
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and /or registered office	ב ל
	GERALD F BEAN		
	10943 SOUTH DIXIE HIGHWAY		
	(P.O. Box NOT acceptable)	
	MIAM! FL 33156		
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its registered agent,	
Such change wa authorized by fl	as authorized by resolution duly adopte the board, or the corporation has been no	ed by its board of directors or by an officer so otified in writing of the change.	
Som	of Dank	ROBERT F HARTER, SECRETARY	
, ,	ire of an officer or director)	(Printed or typed name and title)	
I nereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent at to comply with the provisions of all state of a Lam familiar with and accept the object of the province of the country of this change in the been rotified in writing of this change	nd agree to act in this capacity, tutes relative to the proper and complete performance ligation of my position as registered agent. Or, if this ie registered office address, I hereby confirm that the t.	
Sau	Hoff fr	MAY 2, 2005	
(St	nature of Registered Agent)	(Date)	
If signing on be	half of an entity:		
T)	yped or Printed Name)		

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