

P99000055757

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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change

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ADR
11/14/05

DEPARTMENT OF STATE
ACCOUNT FILING COVER SHEET

Account Number FCA000000017
Reference: _____
(Sub Account)
Date: 11/10/05
Requestor Name: Carlton Fields
Address: Post Office Drawer 190
Tallahassee, Florida 32302
Telephone: (850) 224-1585
Contact Name: Kim Pullen, CLA (ext. 5261)

Corporation Name: Qualsure Underwriting
Agencies, Inc.
Entity Number: P99000055757
Authorization: Kim Pullen

☐ Certified Copy

☐ New Filings

☐ Fictitious Name

☒ Plain Stamped Copy
☒ Amendments

☐ Certificate of Status

☐ Annual Report

☐ Registration

(X) Call When Ready

(X) Call if Problem

() After

(X) Walk In

() Will Wait

(X) Pick Up

CF Internal Use Only

Client: 50748 Matter: 25696
Name: Beth V. Office: TAL

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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, 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.

1. The name of the corporation: QUALSURE UNDERWRITING AGENCIES, INC.
2. The principal office address: 814 A1A NORTH 200, PONTE VEDRA BEACH, FL 32082
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 6/18/1999 Document number: P99000055757
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

NANCY LINNAN, ESQ.

215 SOUTH MONROE STREET, SUITE 500

TALLAHASSEE, FLORIDA 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CFRA, LLC

4221 WEST BOY SCOUT BOULEVARD, SUITE 1000

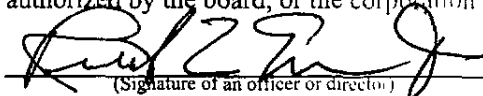
(P.O. Box NOT acceptable)

TAMPA, FLORIDA 33607

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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, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

RICHARD L. ERVIN, JR. CFO & SEC.
(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

11/10/05
(Date)

If signing on behalf of an entity:

R. Terry Rigby
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314