# **2018 FLORIDA PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P16000048949

Entity Name: BRITNI BURKINS INSURANCE AGENCY, INC.

FILED
Apr 27, 2018
Secretary of State
CR1137311821

# **Current Principal Place of Business:**

11516 SAN JOSE BOULEVARD SUITE #4 JACKSONVILLE, FL 32223

# **Current Mailing Address:**

11516 SAN JOSE BOULEVARD SUITE #4 JACKSONVILLE, FL 32223

FEI Number: 81-2829144 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

BURKINS, BRITNI S 11516 SAN JOSE BOULEVARD SUITE #4 JACKSONVILLE, FL 32223 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: BRITNI S BURKINS 04/27/2018

Electronic Signature of Registered Agent Date

# Officer/Director Detail:

Title P

Name BURKINS, BRITNI S

Address 11516 SAN JOSE BOULEVARD SUITE

#4

City-State-Zip: JACKSONVILLE FL 32223

SIGNATURE: BRITNI S BURKINS

I hereby 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 all other like empowered.

Electronic Signature of Signing Officer/Director Detail

AGENCY OWNER

Date

04/27/2018