2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2014
Secretary of State
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Entity Name: COMA INSURANCE AGENCY INC.

Current Principal Place of Business:

46 SHOPPING PLAZA
302
CHAGRIN FALLS, OH 44022

Current Mailing Address:

46 SHOPPING PLAZA
302
CHAGRIN FALLS, OH 44022

FEI Number: 34-1126672

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	P	Title	VP
Name	STRAZZELLA, ALEX	Name	LIBER, CARRIE
Address	46 SHOPPING PLAZA #302	Address	46 SHOPPING PLAZA #302
City-State-Zip:	CHAGRIN FALLS OH 44022	City-State-Zip:	CHAGRIN FALLS OH 44022

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.

SIGNATURE: CARRIE LIBER VICE PRESIDENT 02/25/2014

Electronic Signature of Signing Officer/Director Detail — Date