

854240



FILED

00 SEP 14 PM 1:59

ACCOUNT NO. : 072100000032

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REFERENCE : 818770 4324567

AUTHORIZATION :

*Patricia Pijoto*

COST LIMIT : \$ 35.00

ORDER DATE : August 31, 2000

ORDER TIME : 10:50 AM

ORDER NO. : 818770-515

CUSTOMER NO: 4324567

600003333156--3

CUSTOMER: Ms. Amy Donner  
Heritage Insurance Group  
30851 West Agoura Rd.

Agoura Hills, CA 91301

CHANGE OF AGENT

NAME: HERITAGE INDEMNITY COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
XX            PLAIN STAMPED COPY

G. COULLETTE SEP 14 2000

CONTACT PERSON: Tamara Odom

RECEIVED  
00 SEP 14 AM 11:30  
DIVISION OF CORPORATION

**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 California submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Heritage Indemnity Company

2. The mailing address of the corporation is: 30851 Agoura Road, Agoura Hills, CA 91301

3. Date of incorporation/qualification: 9/30/82 Document number: 854240

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

Insurance Commissioner/ Dept. of Insurance  
The Capitol  
Tallahassess, Fl 32314

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

Corporation Service Company  
1201 Hays Street  
Tallahassee, Florida 32301

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

(Signature of an officer, chairman or vice chairman of the board)

8/28/00  
(Date)

James J. Owens, Secretary  
(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.*

By: Bobbie J. Hall  
(Signature of Registered Agent)

9-13-00  
(Date)

If signing on behalf of an entity:

Bobbie J. Hall  
(Typed or Printed Name)

Asst. V.P.  
(Capacity)

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