

83 1139  
 Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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To: Division of Corporations  
 Fax Number : (850)617-6380

From: Account Name : UNITED AGENT GROUP INC.  
 Account Number : 120160000086  
 Phone : (561)508-5033  
 Fax Number : (561)694-1639

2022 NOV 17 AM 10:25  
 RECEIVED

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

2022 NOV 17 PM 3:48

REGISTERED AGENT CHANGE  
 MILLIMAN, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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

1. The name of the corporation: Milliman, Inc.

2. The principal office address: 1301 FIFTH AVENUE, SUITE 3800  
SEATTLE, WA 98101-2605

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 10/24/1973 Document number: 831139

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION, FL 33324

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

United Agent Group Inc.  
801 US Highway 1  
North Palm Beach, FL 33408

P.O. Box NOT acceptable

2022 NOV 17 AM 10:22  
FILED


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

Tasha Edwards, Attorney-in-Fact  
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

11/17/2022  
Date

If signing on behalf of an entity:

Tasha Edwards, Special Secretary  
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  
CR2E045 (04/13)