Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000028620 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

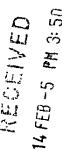
Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850) 878-5368

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

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REGISTERED AGENT CHANGE BLISS AND GLENNON, INC.

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COVER LETTER

Bi	iss and Glennon, Inc.	•	•
SUBJECT:_		Corporation	
DOCUMENT	F0600007924		<u></u> .
The enclosed	Statement of Change of Registered Of	ffice/Agent and fee are submitted	for filing.
Please return a	ll correspondence concerning this me	itter to the following:	
• •	Sandy Sanders	. ,	
	Name of	Contact Person	
	AmWINS Group, Inc.		
	Firm/Company		•
	4725 Piedmont Row Dr. Suite 600		
	Address		· [
	Charlotte, NC 28210		•
	City/State and Zip Code		
	sandy.sanders@amwins.com		
	E-mail address: (to be used for	or future annual report notificat	lon)
	•	••	
For further inf	ormation concerning this matter, plea	se call:	
Sandy Sanders		704 749-2752	
	Name of Contact Person	Area Code & Daytime	Telephone Number
Enclosed is a	35.00 check made payable to the De	partment of State.	
	-Mailing-Address:	Street Address:	

Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

JL004 - 05/20/2013 Welling Khuser Onka

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

statement of ch	provisions of sections 607.0502, 617.050 ange is submitted for a corporation orga	nized under the laws of the State of	California
•.	er to change its registered office or regist	tered agent, or both, in the State of	Florida.
· I. The name of	the corporation: Bliss and Glennon, Inc.	·	
2. The principal	office address:	<u> </u>	<u> </u>
435 North Pa	cific Coast Highway Suite 200 Redondo.	CA 90277	
	, , , , , , , , , , , , , , , , , , , ,	•	
4725 Pledi	mont Row Dr. Suite 600 Charlotte, NC 282	210	
4. Date of incor	poration/qualification: 12/28/2006	Document number: F060000	07924
	d street address of the current registered artment of State: (If resigned, enter resign		rith the
	NATIONAL CORPORATE RESEARCH	, LTD., INC.	
	155 OFFICE PLAZA DRIVE		
	TALLAHASSEE/FL/32301		•
6. The name and (if changed);	d street address of the new registered age	nt (if changed) and /or registered of	Tice
	C T Corporation System		,
	c/o C T Corporation System, 1200 South I	Pine Island Road	
	P.O. Dox NO	l'acceptable	•
	Plantation, Florida 33324	<u> </u>	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of i	is registered agent,
Such change was authorized by the	as authorized by resolution duly adopted the board, or the corporation has been no	i by its board of directors or by an utified in writing of the change.	officer so
IT Tu		Robert Abramson President	• •
	us of an quices or dia Ho-	Printed or typed name and to	
I nereby accept I further agree performance of agent: Or, if th hereby confirm	the appointment as registered agent an to comply with the provisions of all stat my duties, and I am familiar with and is document is being filed merely to ref that the corporation has been notified	d agree to act in this capacity agree to the proper and con scept the obligation of my positio ect-a-change in the registered offi in writing of this change.	npiete n as registered se address, I———
By: CT/Cor	A COLOR	2/4/2014	
Sig	plant of Regiment April	Date	
If signing on be	half of an entity: Kristin Bolden		
	ssistant Secretary	·	
τ	yped 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.:
CR2E045 (0M12)

FLOOR - 05/20/2013 Walnut Kleiner Online