

F08 000002740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

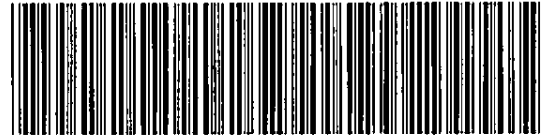
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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TALLAHASSEE, FLORIDA

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5. HUNT
03/21/24

CT CORP
(850) 656- 4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 03/20/2024

Acc#I20160000072

W: C DW

Name:	GBS INSURANCE AND FINANCIAL SERVICES, INC.
Document #:	
Order #:	15440318

Certified Copy of Arts & Amend:	<input type="checkbox"/>	
Plain Copy:	<input type="checkbox"/>	
Certificate of Good Standing:	<input type="checkbox"/>	
Certified Copy of	<input type="checkbox"/>	
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:
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Amount: \$ **43.75**

STATE OF FLORIDA
 TALLAHASSEE, FL
 MAR 20 2024
 10:46 AM
 ED

Thank you!

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, this statement of change is submitted for a corporation organized under the laws of the State of DELAWARE in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: GBS INSURANCE AND FINANCIAL SERVICES, INC.
2. The principal office address: 2850 GOLF RD ROLLING MEADOWS, IL, 60008-4050
3. The mailing address (if different):
4. Date of incorporation/qualification: 06/18/2008 Document number: F08000002740
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)

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
C T Corporation System
1200 South Pine Island Road
P.O. Box NOT acceptable
Plantation, Florida 33324

DEPARTMENT OF STATE
TALLAHASSEE, FL
2008 APR 22 9 AM 10:46
ED

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.

Donna Jenner
Signature of an officer or director

Donna Jenner, Secretary
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.

C T Corporation System
Signature of Registered Agent

3/14/24
Date

By:

If signing on behalf of an entity:
Maria Ozaeta, Vice President
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)