

M17 00000 1683

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

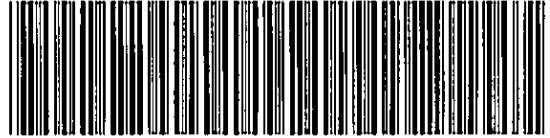
(Business Entity Name)

(Document Number)

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2020 NOV 30 PM 5:44  
REGISTRAR OF STATE  
PALM BEACH, FL

O SIMMONS

JAN 13 2021



CSC - WILMINGTON  
251 Little Falls Drive  
Wilmington De 19808

800-927-9800  
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Soraya Sariaslani soraya.sariaslani@cscglobal.com

Date: November 25, 2020

Order#: 490240-010

Re: FGI LICENSING INSURANCE SERVICES, LLC

Enclosed please find:

- Change of Registered Agent and Office.
- Check in the amount of \$25.00.

Please take the following action:

- File in your office on a routine basis.
- Issue Proof of Filing.
- Please return evidence to the following:

Attn: Soraya Sariaslani  
c/o Corporation Service Company  
251 Little Falls Drive  
Wilmington, DE 19808

- Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: FGI LICENSING INSURANCE SERVICES, LLC

2. (a) 80 BROAD ST, 22ND FLOOR (b) 80 BROAD ST, 22ND FLOOR

Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*

Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*

NEW YORK, NY 10004

NEW YORK, NY 10004

02/24/2017

M17000001683

3. Date of filing/registration in Florida

4. Document number

5. (a) REGISTERED AGENT SOLUTIONS, INC.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

155 OFFICE PLAZA DR.

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

SUITE A

TALLAHASSEE, FL 32301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Corporation Service Company

NEW Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

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 TALLAHASSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Jill E. Cilmi  
Signature of a member or authorized representative of a member

Jill Cilmi, Authorized Person  
Printed or typed name of signee

*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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Grace E. Kirby  
Signature of Registered Agent

Grace E. Kirby, Assistant Vice President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00