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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

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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13 MAR -7 AM 10:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
AMWINS INSURANCE BROKERAGE OF LOS ANGELES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

TALLAHASSEE, FLORIDA

13 MAR -7 AM 9:43

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Electronic Filing Menu

Corporate Filing Menu

Help

B. BOSTICK

MAR - 8 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AmWINS Insurance Brokerage of Los Angeles, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sandy Sanders

Name of Person

AmWINS Insurance Brokerage of Los Angeles, LLC

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 future annual report notification)

For further information concerning this matter, please call:

Sandy Sanders

at (704)

749-2752

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

FILED
TALLAHASSEE, FLORIDA

13 MAR -7 AM 9:43

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: AmWINS Insurance Brokerage of Los Angeles, LLC

2. Jurisdiction of its organization: North Carolina

3. Date authorized to do business in Florida: 12/11/2012

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 01/03/2013

5. New name of the limited liability company: Grasham & Associates, LLC
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration:

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment corrects any false statement, indicate the statement being corrected and the correction:

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of a member or the authorized representative of a member

Scott Michael Purviance 2/28/2013
Typed or printed name of signee

Filing Fee: \$25.00



NORTH CAROLINA

Department of the Secretary of State

CERTIFICATE OF NAME CHANGE

I, **ELAINE F. MARSHALL**, Secretary of State of the State of North Carolina, do hereby certify that on the 3rd day of January, 2013, articles duly executed by the proper officer to change the company name of the limited liability company named below, were filed in this office:

Name at time of submission of name change amendment:

AMWINS INSURANCE BROKERAGE OF LOS ANGELES, LLC

Name Change To

GRESHAM & ASSOCIATES, LLC

I FURTHER CERTIFY that this certificate is in compliance with North Carolina General Statutes 55D-26 and may be recorded in the office of the Register of Deeds in the same manner as deeds, the former name of the limited liability company appearing in the "Grantor" index and the amended name of the limited liability company appearing in the "Grantee" index.



Scan to verify online.

Certification# 93692347-1 Reference# 11350527-0a Page: 1 of 1
Verify this certificate online at www.secretary.state.nc.us/verification

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 1st day of March, 2013.

Elaine F. Marshall

Secretary of State

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