Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H15000010342 3)))



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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.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GRESHAM & ASSOCIATES, LLC Certificate of Status Certified Copy Page Count

Estimated Charge

Electronic Filing Menu Corporate Filing Menu

0 04

\$25.00

JAN 2 G 2015

T. HAMPTON

10 at 12 (2/4)

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Gresham & Associates, LLC		
Name of Foreign	Limited Liability Comp	any
Dear Sir or Madam:		
The enclosed application, certificate and fee(s) ar	e submitted for filing.	
Please return all correspondence concerning this	matter to the following	:
Name of Person		
Firm/Company		
Address		
71441000		
City/State and Zip Code	<u> </u>	
heather.carpenter@amwins.com E-mail address; (to be used for future annual re	anout notification)	
For further information concerning this matter, p		
	at /	
Name of Person	Area Code & Daytir	ne Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassec, Florida 32301	i ai ai	assee, Fidrida 52514
Enclosed is a check for the following amount: \$\square\$\$ \$\$25 \text{ Filing Fee}\$\$\$ Certificate of Status	☐ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy
CR2E055 (12/13)		Sentitud Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY 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 D State: Oresham & Associates, LLC	Department of
2. Jurisdiction of its organization: North Carolina	
3. Date authorized to do business in Florida: 12/12/2012	
SECTION II (4-7 complete only the applicable changes)	
4. New name of the limited liability company: AmWINS Access Insurance Services, L. (must contain "Limited Liability Company,")	LC "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting be Florida and attach a copy of the written consent of the managers or managing men the alternate name. The alternate name must contain "Limited Liability Company," or "LLC.")	abers adopting
5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction of organization, indicate new jurisdiction of organization, indicate new jurisdiction of organization.	ction:
6. If the amendment changes person, title or capacity in accordance with 605.0902 that change:	2 (1)(e), indicate
7. Attached is an original certificate, if required: no more than 90 days old, evider aforementioned amendment(s), duly authenticated by the official having custod jurisdiction under the law of which this entity is organized. Signature of the authorized representative	
Scott M. Purviance	
Typed or printed name of signee	TAS 15
Filing Fee: \$25.00	JAN 13 AH II: CRETARY OF ST LLAHASSEE. FLO



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 31st day of December, 2014, 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:

GRESHAM & ASSOCIATES, LLC

Name Change To

AMWINS ACCESS INSURANCE SERVICES, 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.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 12th day of January, 2016.

Secretary of State

Glaine I. Marshall

Certification# 96309728-1 Reference# 12303797-gs Page: 1 of 1 Verify this certificate online at www.secretary.state.no.us/verification