

M18000011586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

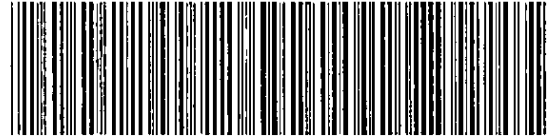
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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LLC N/C & Amend

FILED

2022 MAY 18 AM 11:08

RECEIVED

2022 MAY 18 PM 12:1

TALLAHASSEE, FLORIDA

A. RAMSEY

MAY 19 2022

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 691150 7887641

AUTHORIZATION : 

COST LIMIT : \$ 254.00

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ORDER DATE : May 18, 2022

ORDER TIME : 10:37 AM

ORDER NO. : 691150-005

CUSTOMER NO: 7887641  
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FOREIGN FILINGS

NAME: GL MARKETING, LLC

\_\_\_\_ CORPORATE  
\_\_\_\_ LIMITED PARTNERSHIP  
XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GL Marketing, 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:

Halina A. Zawodni

\_\_\_\_\_  
Name of Person

Faegre Drinker Biddle & Reath LLP

\_\_\_\_\_  
Firm/Company

320 South Canal Street, Suite 3300

\_\_\_\_\_  
Address

Chicago, Illinois 60606, USA

\_\_\_\_\_  
City/State and Zip Code

halina.zawodni@faegredrinker.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Halina A. Zawodni

\_\_\_\_\_  
Name of Person

at ( 312 ) 356-5032

\_\_\_\_\_  
Area Code & Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-4 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: GL Marketing, LLC

Enter new principal office address, if applicable: \_\_\_\_\_

**(Principal office address  
MUST BE A STREET ADDRESS)**

Enter new mailing address, if applicable: \_\_\_\_\_

**(Mailing address  
MAY BE A POST OFFICE BOX)**

10555 Group 1001 Way

Zionsville, IN 46077-9845

2. The Florida document number of this limited liability company is: M18000011586

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 12/21/2018

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: Clear Spring Life Marketing, LLC  
(must contain "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 contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida Street Address*

\_\_\_\_\_, Florida \_\_\_\_\_  
City Zip Code

**New Registered Agent's Signature, if changing Registered Agent:**

*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.*

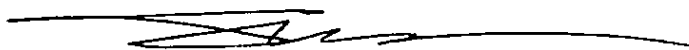
\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

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

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Director / Manager	James D. Purvis	401 Pennsylvania Pkwy, Suite 300	<input type="checkbox"/> Add
		Indianapolis, IN 46280	<input checked="" type="checkbox"/> Remove
Director / Manager	Curtis P. Steger	401 Pennsylvania Pkwy, Suite 300	<input type="checkbox"/> Add
		Indianapolis, IN 46280	<input checked="" type="checkbox"/> Remove
Director / Manager	Daniel J. Towriss	401 Pennsylvania Pkwy, Suite 300	<input type="checkbox"/> Add
		Indianapolis, IN 46280	<input checked="" type="checkbox"/> Remove
Member	CSLIC Holdings, LLC	10555 Group 1001 Way	<input checked="" type="checkbox"/> Add
		Zionsville, IN 46077-9845	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: 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 the authorized representative

Stephen M. Coons - Secretary

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "CSL MARKETING, LLC", CHANGING ITS NAME FROM "CSL MARKETING, LLC" TO "CLEAR SPRING LIFE MARKETING, LLC", FILED IN THIS OFFICE ON THE TWENTY-EIGHTH DAY OF APRIL, A.D. 2022, AT 12:43 O'CLOCK P.M.



5529371 8100  
SR# 20221677513

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 203301026  
Date: 04-28-22

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 12:43 PM 04/28/2022  
FILED 12:43 PM 04/28/2022  
SR 20221677513 - File Number 5529371

**CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF FORMATION  
OF  
CSL MARKETING, LLC**

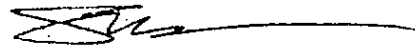
It is hereby certified that:

1. The name of the limited liability company is CSL Marketing, LLC, (the "Company").

2. The Certificate of Formation of the Company is hereby amended by striking out the First Article thereof and by substituting in lieu of the old First Article the following new First Article:

**"FIRST:** The name of the limited liability company is Clear Spring Life Marketing, LLC."

**IN WITNESS WHEREOF,** the Company has caused this Certificate of Amendment to be signed by an authorized person of the Company on this 28<sup>th</sup> day of April, 2022.



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Stephen M. Coons, Secretary