I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: ALAN T RASOF

Electronic Signature of Signing Officer/Director Detail

Entity Name: FINANCIAL SECURITY INSURANCE CONSULTANTS, INC.

Current Principal Place of Business: 1920 E. HALLANDALE BEACH BLVD,

SUITE 502 HALLANDALE BEACH, FL 33009

Current Mailing Address:

P.O. BOX 85218 HALLANDALE BEACH, FL 33008 US

FEI Number: 32-0134237

Name and Address of Current Registered Agent:

LANDAU, BURTON 1920 E HALLANDALE BCH BLVD. SUITE 900 HALLANDALE BEACH, FL 33009 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title CEO RASOF, ALAN T Name PO BOX 85218 Address City-State-Zip: HALLANDALE BEACH FL 33008

FILED Apr 05, 2019 Secretary of State 5916048318CC

Certificate of Status Desired: Yes

Date

04/05/2019