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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

OWNER

SIGNATURE: MADELAINE MARTINEZ Electronic Signature of Signing Authorized Person(s) Detail

2023 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L13000111758

Entity Name: HARBOR & ASSOCIATES INSURANCE BROKERS, LLC

Current Principal Place of Business:

921 NW 13TH STREET GAINESVILLE, FL 32601

Current Mailing Address:

2603 NW 13TH ST #307 GAINESVILLE. FL 32609 US

FEI Number: 46-3353829

Name and Address of Current Registered Agent:

MARTINEZ, MADELAINE L 10310 NE 99TH PLACE ARCHER, FL 32618 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: MADELAINE L MARTINEZ

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title MGRM Name MARTINEZ, MADELAINE L 921 NW 13TH STREET Address City-State-Zip: GAINESVILLE FL 32601

Certificate of Status Desired: Yes

12/06/2023

Date

12/06/2023 Date

FILED Dec 06, 2023 Secretary of State 6929171696CR