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.

AR

SIGNATURE: YAAKOV BEYMAN

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail :

| Title | MGR | Title | AR |
|-----------------|-----------------------|-----------------|-----------------------|
| Name | BEYMAN, DEBRA | Name | BEYMAN, YAAKOV |
| Address | 40 WALL ST 60TH FLOOR | Address | 40 WALL ST 60TH FLOOR |
| City-State-Zip: | NEW YORK NY 10005 | City-State-Zip: | NEW YORK NY 10005 |

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.

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000103595

Entity Name: DESOTO MOULTON SOUTHERN INSURANCE GROUP, LLC

Current Principal Place of Business:

948 20TH ST VERO BEACH, FL 32960

Current Mailing Address:

40 WALL ST 60TH FLOOR NEW YORK, NY 10005 US

FEI Number: 81-2764531

SIGNATURE:

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET SUITE 102 TALLAHASSEE, FL 32301 US

Date

FILED Apr 24, 2017 Secretary of State CC0083543458

Date

Certificate of Status Desired: No