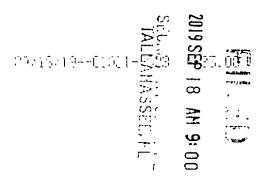
F03 000001845

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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OCT 0 3 2019

C Kins .



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Soraya Sariaslani soraya.sariaslani@cscglobal.com

Date: September 17, 2019

Order#: 873448-022

Re: BROWN & BROWN INSURANCE OF GEORGIA, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Soraya Sariaslani c/o Corporation Service Company 251 Little Falls Drive

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 6 inge is submitted for a corporation r to change its registered office of	n organized under the la	ws of the State	e of GA		
	the corporation: BROWN & BROW					
2. The principal	office address: 3483 Satellite Blv	d Suite 100 Duluth, GA	30096		·	
3. The mailing a	address (if different): 220 S. Ridge	ewood Ave. Daytona Be	ach, FL 3211	4		
4. Date of incorp	poration/qualification: 04/14/200	3 Document	number: F03	000001845		
	d street address of the current regi rtment of State: (If resigned, enter		ed office on fi	ile with the		
	C T CORPORATION SYSTEM					
	1200 SOUTH PINE ISLAND ROAD					
	PLANTATION, FL 33324					
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office Corporation Service Company					
	Corporation Service Company			<u> </u>	<u> </u>	
1201 Hays Street						
	Tallahassee	Box NOT acceptable FL	32301		ה ה	
The street address changed will	ess of its registered office and the be identical.	e street address of the bu	isiness office	of its regist	ered agent.	
Such change w	as authorized by resolution duly he board, or the corporation has b	adonted by its board of a	directors or b	v an officer		
Jill Cilmi, Vice President						
Signau	of an officer or director		ted or typed name			
I further agree performance of agent. Or, if th hereby confirm	the appointment as registered a to comply with the provisions of my duties, and I am familiar wit his document is being filed merely that the corporation has been no on Service Company	all statutes relative to the h and accept the obligate to reflect a change in t	he proper and tion of my pos he registered	t complete sition as reg	istered 288, 1	
By: Mrs	en L-Kubl	09/13/2019	Date	····		
•	ehalf of an entity:		.,,,,,,			
	, Assistant Vice President	_				
Т	Typed or Printed Name					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *