## F05000002311

| (Re                     | questor's Name)    |           |
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| (Cit                    | ty/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
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| (Bu                     | siness Entity Nan  | ne)       |
|                         |                    |           |
| (Do                     | ocument Number)    |           |
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| Certified Copies        | _ Certificates     | of Status |
|                         |                    |           |
| Special Instructions to | Filing Officer:    |           |
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Office Use Only



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SECTION AND A CORDA



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@cscqlobal.com

Date: September 17, 2019

Order#: 873450-383

Re: BROWN & BROWN OF MINNESOTA, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

<u>MX</u> File in your office on a routine basis.

<u>XX</u> Issue Proof of Filing.

<u>XX</u> 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

| -   | <b>-</b>  | 12, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ution organized under the laws of the State of MN   |
|---|---|---|
|   |   | e or registered agent, or both, in the State of Florida.  |
| 1. The name of t  | he corporation: BROWN & BR  | ROWN OF MINNESOTA, INC.   |
| 2. The principal  | office address: 7301 Ohms La  | ane Suite 210 Minneapolis, MN 55439-2369  |
|   |   |   |
| 3. The mailing a  | ddress (if different): 220 S. R   | idgewood Ave. Daytona Beach, FL 32114   |
| 4. Date of incorp   | poration/qualification: 04/14/2   | 2005 Document number: F05000002311  |
|   | I street address of the current r<br>tment of State: (If resigned, er   | registered agent and registered office on file with the iter resigned)  |
|   | C T CORPORATION SYSTE   | EM  |
|   | 1200 SOUTH PINE ISLAND  | ROAD 59 5   |
|   | PLANTATION, FL 33324  | SEP SEP   |
| 6. The name and (if changed):   | I street address of the new regi  | stered agent (if changed) and /or registered office   |
|   | Corporation Service Compar  |   |
|   | 1201 Hays Street  |   |
| P.O. Box NOT acceptable   |   |   |
|   | Tallahassee   | FL 32301  |
| The street addre  | ss of its registered office and<br>be identical.  | the street address of the business office of its registered ager  |
| Such change wa<br>authorized by th  | es authorized by resolution du<br>be board, or the corporation ha   | ly adopted by its board of directors or by an officer so as been notified in writing of the change.   |
| (   | it E. Conice of director  | Jill Cilmi, Vice President  |
| Signatur  | re of an officer or director  | Printed or typed name and title   |
| I further agree to<br>performance of<br>agent. Or, if thi<br>hereby confirm | the appointment as registered o comply with the provisions my duties, and I am familiar is document is being filed menthat the corporation has been Service Company | d agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as registered rely to reflect a change in the registered office address. I notified in writing of this change. |
|   | e t-Kubi.   | 09/13/2019  |
|   | nature of Registered Agent  | Date  |
| If signing on bel   | half of an entity:  |   |
| Grace E. Kirby,   | Assistant Vice President  |   |
| Ty  | ped or Printed Name   | <del></del>   |

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

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