## F0500005797

(Requestor's Name)			
(Address)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
(Ony, Cutter Exp., Holle II)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
(2000			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
Special instructions to 1 ming Officer.			

Office Use Only



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12/68/18--01038--008 \*\*88.00



Ra Change



CSC - WILMINGTON P 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: December 20, 2018

Order#: 539712-088

Re: WILLIS OF VIRGINIA, 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.

OUCA, XCOA

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

statement of cha	nge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of VA or registered agent, or both, in the State of Florida.	s 	
	the corporation: WILLIS OF VIRO			
2. The principal Glen Allen, V	office address: North Shore Cor	nmons, 4951 Lake Brook Drive Ste 300 & 350		
4. Date of incor	poration/qualification: 10/06/20	Document number: F05000005797		
	I street address of the current regrument of State: (If resigned, ente	istered agent and registered office on file with the resigned)		
	C T CORPORATION SYSTEM	<u> </u>		
	1200 SOUTH PINE ISLAND ROAD			
	PLANTATION	FL 33324		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Corporation Service Company			
	1201 Hays Street		:	
	Tallahassee	, Box_NOTacceptable FL 32301	.a .:	
The street addre	ess of its registered office and the be identical.	ne street address of the business office of its registered	ا امر	
		adopted by its board of directors or by an officer so been notified in writing of the change.		
	ie E. agnie	Jill Cilmi, Vice President		
I hereby accept I further agree performance of agent. Or, if th hereby confirm	to comply with the provisions of my duties, and I am familiar wi is document is being filed merel	Printed or typed name and title  igent and agree to act in this capacity.  fall statutes relative to the proper and complete th and accept the obligation of my position as register by to reflect a change in the registered office address. I  otified in writing of this change.	red I	
By: Drac	e C-Kuble	12/18/2018		
J	nature of Registered Agent	Date		
• -	half of an entity:			
	Assistant Vice President  yped 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 \* \* \*