

F06000 004 848

 (Requestor's Name)

 (Address)

 (Address)

 (City/State/Zip/Phone #)

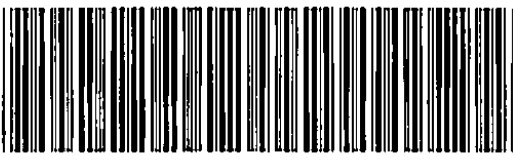
PICK-UP WAIT MAIL

 (Business Entity Name)

 (Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:



200334310892

STATE OF FLORIDA
 TALLAHASSEE, FLORIDA

OCT 02 2019
 S. YOUNG

Office Use Only



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#: 873452-154

Re: BROWN & BROWN PROGRAM INSURANCE SERVICES, 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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of CA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: BROWN & BROWN PROGRAM INSURANCE SERVICES, INC.

2. The principal office address: 681 S Parker Street Suite 300 Orange, CA 92868

3. The mailing address (if different): 220 S. Ridgewood Ave. Daytona Beach, FL 32114

4. Date of incorporation/qualification: 07/20/2006 Document number: F06000004848

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

19 SEP 10 ...
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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 FL 32301
PG Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Jill E. Cilmi
Signature of an officer or director

Jill Cilmi, Vice President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company
By: Grace E. Kirby
Signature of Registered Agent

09/16/2019
Date

If signing on behalf of an entity:

Grace E. Kirby, Assistant Vice President
Typed or Printed Name

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