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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

## REGISTERED AGENT CHANGE BROWN & BROWN OF DELAWARE, INC.

Certificate of Status	0
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C. MUSTAIN

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Corporate Filing Menu

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3/20/2012

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CT CORPORATION

## COVER LETTER

TO: Amend Division	lment Section on of Corporations	
SUBJECT:	Brown & Brown of	Delaware, Inc.
	Name of	Corporation
DOCUMENT	NUMBER: F	07000005054
The enclosed S	tatement of Change of Registered Offi	ice/Agent and fee are submitted for filing.
Please return al	l correspondence concerning this matt	er to the following:
	Name of C	ontact Person
	Firm/C	Company
	Ad	dress
	City/State a	and Zip Code
	pbriand@bb	-
or further infor	E-mail address: (to be used for mation concerning this matter, please	future annual report notification) call:
		at ()
٨	ame of Contact Person	at () Area Code & Daytime Telephone Numb
Enclosed is a \$3:	5.00 check made payable to the Depar	tment of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tellahassee, FL 32301

CR2E045 (8/05)

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03/20/2012 03:20 8626336032 Ct CORPORATION

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

<ol> <li>The name</li> </ol>		Brown & Brown of Delaware	Inc		
	I. The name of the corporation:  2. The principal office address; 200 CONTINENTAL DRIVE SUITE 402				
	V DE 10712	L DRIVE SUITE 402			
3. The maili	ng address (if different):				
4. Date of in	corporation/qualification: 10/11/2	2007 Document number:	F07000005054		
5. The name	and street address of the current register epartment of State: (If resigned, onter res	ared agent and registered office on file	7.		
	CORPORATION SERVICE COMPA	ANY			
	1201 HAYS STREET		— AHA 20		
	TALLAHASSGE FL 32301-2525		O PM		
6. The name ( (if change)	and street address of the new registered	agent (if changed) and /or registered	office ?: 3		
	C T Corporation System				
	c/o C T Corporation System, 1200 So	outh Pine Island Road			
		NOT acceptable	<del></del>		
	Plantation, Florida 33324		<del></del>		
he street ade s changed w	dress of its registered office and the su fill be identical.	reet address of the business office of	of its registered agent,		
uch change uthorized by	was authorized by resolution duly add the board, or the corporation has been	opted by its board of directors or by in notified in writing of the change.	an officer so		
<u>K</u> N	WE BALL	Kristin Bolden, Sormand and Artistic Bolden, Artistic Bolden,	ecretary		
hereby acce further agre f my duties.	होते के जिस्ति के बाल्टान gpt the appointment as registered agen ge to comply with the provigions of all and I am familiar with and accept the being filed merely to reflect a change i has been notified in writing of this chai	rimed or typed mime us if and agree to act in this capacity, statutes relative to the proper and c obligation of my position as registe in the registered office address, I he inge.	complete performance ered agent. Or, if this ereby confirm that the		
ocument is t orporation h		3/1/2012			
	T Corporation System				
. C' By:	Signature of Registery Agent	Date			
C Sy: Signing on t	Jan M Der	Date			
C Sy: Signing on t	Signature of Registered Agent behalf of an entity:	Date			

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