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(R	equestor's Name)		
(A	ddress)	<u></u>	
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(C	ity/State/Zip/Phone #)	· · · · · · · · · · · · · · · · · · ·	
PICK-UP	TIAW	MAIL	
		<u> </u>	
(B	usiness Entity Name)		
(Document Number)			
Certified Copies	Certificates of	Status	
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Special Instructions to	Filing Officer:		

Office Use Only



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2021 MAY -3 AM 10: 35
SECRETARY OF STATE
TALLAHASSEF, FI

614/21



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: April 29, 2021

Order#: 779328-387

Re: RSC INSURANCE BROKERAGE, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 \_.

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: Erika Zavala Daza 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	nge is submitted for a corporation or	0502, 607.1508, or 617.1508, Florido ganized under the laws of the State of gistered agent, or both, in the State of	ſ_DE
1. The name of t	he corporation: RSC INSURANCE B	ROKERAGE, INC	
	office address: 160 Federal Street 4t		
3. The mailing a	ddress (if different):		
4. Date of incorp	ooration/qualification: 03/24/2008	Document number: F0800	0001322
	street address of the current registere tment of State: (If resigned, enter resi	ed agent and registered office on file vigned)	with the
	3H AGENT SERVICES, INC.		
1415 PANTHER LANE SUITE 327		<b>202</b> SE	
	NAPLES, FL 34109		CRE ALL
6. The name and (if changed):	street address of the new registered a	agent (if changed) and /or registered (	021 MAY -3 AM 10: 35 SECRETARY OF STATE TALLAHASSEE. FL
	Corporation Service Company		
	1201 Hays Street		35 ATE
P.O. Box NOT acceptable			<del></del>
	Tallahassee	FL 32301	_
The street addre	ss of its registered office and the str be identical.	eet address of the business office of	its registered agent.
Such change wa authorized by th	s authorized by resolution duly adop board, or the corporation has been	pted by its board of directors or by a i notified in writing of the change.	n officer so
	Xie E. Cienii	Jill Cilmi, Vice President	
- '	e of in officer or director	Printed or typed name and	
corporation nas	the appointment as registered agent o comply with the provisions of all s d I am familiar with and accept the ag filed merely to reflect a change in been notified in writing of this chan a Service Company	t and agree to act in this capacity, statutes relative to the proper and co obligation of my position as register in the registered office address, I her age.	omplete performance ed agent. Or, if this eby confirm that the
By: 🂢	nace t-Kinbly	04/28/2021	
Sign	nature of Registered Agent	Date	
lf signing on bel	nalf of an entity:		
Grace E. Kirby, A	Asst. Vice President		
	ped or Printed Name		

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)

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