## F0900003769

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	:	12000000195
REFERENCE	:	029917 7296128
AUTHORIZATION	:	( English of
COST LIMIT	;	\$ 35,00
October 3, 2023		
8:01 AM		
029917-015		
7296128		
	REFERENCE AUTHORIZATION COST LIMIT October 3, 2023 8:01 AM 029917-015	COST LIMIT : October 3, 2023 8:01 AM 029917-015

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## CHANGE OF AGENT

NAME: SPECIAL INSURANCE SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson

EXAMINER'S INITIALS:

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

1. The name of the corporation: \_\_\_\_\_\_\_SPECIAL INSURANCE SERVICES, INC.

2. The principal office address:

5300 DEMOCRACY DRIVE SUITE 120 PLANO, TX 75024

- 3. The mailing address (if different):
- 4. Date of incorporation/qualification: 09/21/2009 Document number: F09000003769
- 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)

CORPORATE CREATIONS NETWORK INC.			
801 US HIGHWAY 1			
NORTH PALM BEACH	FL 33408		

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		
P.O. Box. NOT acceptable		
Tallahassee	FL 32301	<b>9:</b>

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 Cilmi, Vice President

Date

I kereby 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

Signature of Registered Agent By:

Signature of Registered A

If signing on behalf of an entity:

Grace E. Kirby, Asst. Vice President

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327. TALLAHASSEE, FL 32314 CR2E045 (04/13)

10/09/2023