F09000004629

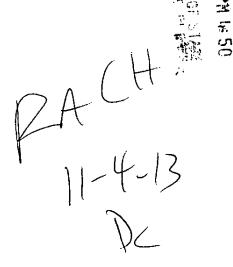
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Evelyn Wright

Date: October 28, 2013

Order#: 846294-197

Re: RELIANCE INSURANCE BROKERS, 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: Evelyn Wright

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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	7.0502, 607.1508, or 617.1508. Florida Statutes, this organized under the laws of the State of South Carolina registered agent, or both, in the State of Florida.	
1. The name of t	he corporation: RELIANCE INSUR	ANCE BROKERS, INC.	
2. The principal	office address: 800 Oak Ridge Turi	npike, Suite A-1000, Oak Ridge, TN 37830	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 11/23/2009	Document number: F09000004629	
	street address of the current registe tment of State: (If resigned, enter re	ered agent and registered office on file with the esigned)	
	C T Corporation System		
	1200 South Pine Island Road		
	Plantation, FL 33324	CT 30	
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	
The street addre	ss of its registered office and the s be identical.	treet address of the business office of its registered agent,	
Such change wa authorized by th	s authorized by resolution duly ade e board, or the corporation has bee	opted by its board of directors or by an officer so en notified in writing of the change.	
Signatur	e of an officer or director	Dona Priebe, Vice President Printed or typed name and title	
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered age o comply with the provisions of all my duties, and I am familiar with a	nt and agree to act in this capacity. I statutes relative to the proper and complete and accept the obligation of my position as registered o reflect a change in the registered office address, I fied in writing of this change.	
•	· Z-Kuble	October 17, 2013	
Sigr	nature of Registered Agent	Date	
If signing on bel	nalf of an entity:		
Grace E. Kirby,	Assistant VP		
Ту	ped or Printed Name		

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