## F15000002403

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## **COVER LETTER**

Division of Corporations
SUBJECT: Brosnan Pask Consultants, LTD Name of Corporation
DOCUMENT NUMBER: F 1500000 2403
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Linda Felici Name of Contact Person
Brosnan RISK Consultants, UTD
One Blue Hill Pluza
Pecivi River NY 16965  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LINDA Felici at (800 ) 590 - 7180 × 807  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section  Street Address: Amendment Section

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO:

Amendment Section

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

in order to change its registered office or registered agent, or both, in the State of Florida  1. The name of the corporation:    BYDS OAN   RISK   CONSU   RATS LTD   WAY STATE   WAY ST	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	
1. The name of the corporation:  BYDS DAY RISK CONSULTANTS LTD. W  2. The principal office address:  All BIVE HILL PLAZA, 1441 PLAZA  WHO PLAZA  3. The mailing address (if different):  4. Date of incorporation/qualification:  6. 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)  Edward Havited  3990 Deer Crossing Court the State (if changed) and for registered office on file with the Florida Department of State: (If resigned, enter resigned)  The name and street address of the new registered agent (if changed) and for registered office on file with the Florida Department of State: (If resigned, enter resigned)  The name and street address of the new registered agent (if changed) and for registered office of its registered agent, if 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 bard, or the corporation has been notified in writing of the change.  Signature of an office production  Figure of the appointment as registered agent and agree to act in this capacity. I further agree to complete with the provisions of all statutes relative to the proper and complete proper of the first data and an appointment with and accept the object name and complete proper of the first data and a surface of the statutes of the greatered office address. I hereby confirm that the corporation has been notified in writing of this change.  Signatury of Registered Agent  If signing on behalf of an entity:	• • • • • • • • • • • • • • • • • • • •	`
3. The mailing address (if different):  4. Date of incorporation/qualification: 61 2015 Document number: F150000340  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)  F2700 Deev Crossiva Court # 2000	1. The name of the corporation: Brosnan Risk Consultants Ltd.	<u>jor</u>
3. The mailing address (if different):  4. Date of incorporation/qualification: 61 2015 Document number: F 50000240  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)  F 4 10 2 4 4 4 5 4 5 5 6 6 7 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7		<u>_ i</u>
4. Date of incorporation/qualification: 6/1/2015 Document number: F   50000240  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)  FCWOVA HCV TVETT  3990 Deev CVOSSIVA COUT #   200 May 200 Ma	,	
Florida Department of State: (If resigned, enter resigned)  Edword Hartwett  3990 Neev Crossing Court # 1888  Name of the name and street address of the new registered agent (if changed) and for registered of the (if changed):  The street address of the new registered agent (if changed) and for registered of the (if changed):  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 band, or the corporation has been notified in writing of the change.  Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the band, or the corporation has been notified in writing of the change.  Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the band, or the corporation has been notified in writing of the change.  Princed or typed name and little  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.  Signatury of Registered Agent  If signing on behalf of an entity:	3. The mailing address (if different):	
Florida Department of State: (If resigned, enter resigned)  Edword Hartwett  3990 Deer Crossing Court the Book May 20  Name of the name and street address of the new registered agent (if changed) and for registered of the (if changed):  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 bard, or the corporation has been notified in writing of the change.  Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the bard, or the corporation has been notified in writing of the change.  Thereby 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.  Signatury of Registered Agent  If signing on behalf of an entity:	4. Date of incorporation/qualification: 6/1/2015 Document number: F 1 5000002	<u>-</u>
6. The name and street address of the new registered agent (if changed) and /or registered of the (if changed):    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, of the corporation has been notified in writing of the change.    Signature of an officer we director   France of typed name and little		
6. The name and street address of the new registered agent (if changed) and /or registered of the (if changed):    John   September   John   J	Edword Hartrett	
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If signing on behalf of an entity:	Ir Ryde N 5/6/19	
K COCIOCIO VICIA IVINOS IX OTE	Brosnan Risk Consultants	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

Typed or Printed Name