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(((H23000291348 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

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

Fmail	Address:			
culati	AUULESS.			

REGISTERED AGENT CHANGE INSURANCE MARKETING SERVICES, INC.

Certificate of Status	0
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1.7

Corporate Filing Menu



COVER LETTER

TO: Amendment Section Division of Corporations

15129570210

Insurance Marketing Services, Inc.

Name of Corporation

DOCUMENT NUMBER

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:

/ Incia i Noriai as	
Name of Contact Person	
Registered Agent Solutions, Inc.	

Firm/Company

Alicia Richards

Corporate Center One, 5301 Southwest Pkwy, Ste 400

Address

Austin, Texas 78735 City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

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 **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

H23000291348 3

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

statement of ch	provisions of sections 607,0502, 617,0502 ange is submitted for a corporation organi er to change its registered office or register	zed under the laws of the Sta	tte of California			
I. The name of	the corporation: Insurance Mark	etina Services. Ir	nc.			
2. The principal	office address: 19000 MACART					
······································	address (if different):					
~	poration/qualification: 1/24/2017	Document number: F	17000000333			
5. The name and	d street address of the current registered ag	ent and registered office on				
	COGENCY GLOBAL	INC.				
	115 NORTH CALHOUN STREET		- SELECTION - SELE			
	TALLAHASSEE	FL 32301	NUG 22			
6. The name and (if changed):	d street address of the new registered agent		2023 AUG 22 AM 8: 40 SLUNE JAKY OF STAIL TALL AHASSEE, FL			
	2894 Remington Green Ln. Ste. A					
	Tallahassee FL	NOT acceptable - 32308				
The street address changed will	ess of its registered office and the street a be identical.	ddress of the business offic	e of its registered agent.			
Such change wanthorized by the	as authorized by resolution duly adopted he board, or the corporation has been noti	by its board of directors or fied in writing of the chang	by an officer so			
		Mitchell Leidner	Treasurer			
hereby accept further agree of my duties, ar locument is ber	the appointment as registered agent and to comply with the provisions of all statu id I am familiar with and accept the oblig ing filed merely to reflect a change in the s been notified in writing of this change.	Printed or typed nan agree to act in this capacin tes relative to the proper ar ation of my position as reg registered office address, l				
M	and the	08/22/2023				
Sig	nature of Registered Agent	Date				
f signing on be	chalf of an entity:					
Mackenzie Hible	er, Assistant Secretary					
Т	yped or Printed Name					
	* * * FILING FER	E: \$35.00 * * *				