L09000085116

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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EXAMINER

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TALLAHASSEE, FLORIDA

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CORPORATION SERVICE COMPANY®

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DIVISION OF CORPORATIONS
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ACCOUNT NO. : I20000000195

REFERENCE : 898848 4727100

AUTHORIZATION :

COST LIMIT : $ 25.00

ORDER DATE : September 1, 2011

ORDER TIME : 11:33 AM

ORDER NO. : 898848-005

CUSTOMER NO: 4727100

CHANGE OF AGENT

NAME: INSURANCESUCCESSMARKETING.COM, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce -- EXT# 2919

EXAMINER: _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: InsuranceSuccessMarketing.Com, L.L.C.

2. (a) Principal office address of limited liability company: InsuranceSuccessMarketing.Com, L.L.C.

(Note: MUST BE STREET ADDRESS) 10205 Deep Skies Drive
Laurel, Maryland 20723

(b) Mailing address of limited liability company: InsuranceSuccessMarketing.Com, L.L.C.

(Note: MAY BE POST OFFICE BOX) 10205 Deep Skies Drive
Laurel, Maryland 20723

09/02/2009
3. Date of filing/registration in Florida

L09000085116
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Alan S. Gassman

Registered Office Address: 1245 Court Street
Suite 102
Clearwater FL 33756

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: James Kefauver

NEW Registered Office Address: 258 Monterey Drive
(MUST BE FLORIDA STREET ADDRESS)
Naples FL 34119

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

X
Signature of a member or authorized representative of a member

Sean Denny, Member
Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

X
Signature of Registered Agent
James Kefauver, Resident Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: $25.00

INHS18 (05/08)