## L12000149570

(Requestor's Name)					
(Address)					
					(City/State/Zip/Phone #)
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Soraya Sariaslani soraya.sariaslani@cscglobal.com

Date: September 17, 2019

Order#: 873452/132

Re: BROWN & BROWN FA HOLDING CO., LLC

Enclosed please find:

<u>XX</u> Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX \_\_\_ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Soraya Sariaslani c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	ume of the limited liability company: BROWN & BROV	WN PA H	HOLDING CO., LLC
2.	(a)	220 S. Ridgewood Ave	(b)	220 S. Ridgewood Ave
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- ( )	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Daytona Beach, FL 32114	<del>-</del>	Daytona Beach, FL 32114
			_	
		11/29/2012	_	L12000149570
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	CT CORPORATION SYSTEM		
		Registered Agent and Registered Office shown on the records of th	e Florida l	Dept, of State:
		1200 SOUTH PINE ISLAND RD		
		Registered Office Address (MUST BE FLORIDA STREET AI	DDRESS)	2
		PLANTATION .FL_	33324	2019
	(b)	Corporation Service Company		SEP
	` '	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	Office add	Iress:
		1201 Hays Street		
		NEW Registered Office Address:		THE THE STATE OF STAT
		Tallahassee FL_	32301	
the ag	ent v is/we	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of cless of organization or the operating agreement of the liability.	he regist pility cor the limit	stered office and the business office of the registered impany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in
		Xue & Comi	Jill C	Cilmi, Authorized Person
		use of a member or authorized representative of a member		Printed or typed name of signee
pri thi to	ovisi e obli mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he I in writing of this change.	erforma	ance of my duties, and I am familiar with and accept
- (N)	χ_	Inaco Cotrolo	DV C	<b>6</b> W. 1
Si	gnatui	re of Registered Agent Corporation Service Company	BY: Gr	race E. Kirby, Assistant Vice President