L30000077128

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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6/19/14

FLORIDA DEPARTMENT OF STATE
Division of Corporations

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14 JUN 18 PM 12:13

June 10, 2014

Jessie King
My Insurance Exchange LLC
2100 Ponce de Leon Suite 601
Coral Gables, FL 33134

SUBJECT: MY INSURANCE EXCHANGE, LLC
Ref. Number: L13000077128

We have received your document for MY INSURANCE EXCHANGE, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for $25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey
Regulatory Specialist II

Letter Number: 914A00012511

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. Name of the limited liability company: My Insurance Exchange, LLC

2. (a) Principal office address of limited liability company:
(*Note: MUST BE STREET ADDRESS*)

2100 Ponce de Leon Blvd Suite 601

Coral Gables, FL 33134

(b) Mailing address of limited liability company:
(*Note: MAY BE POST OFFICE BOX*)

2100 Ponce de Leon Blvd Suite 601

Coral Gables, FL 33134

3. Date of filing/registration in Florida: 05/28/2013

4. Document number: L13000077128

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

Registered Office Address (*MUST BE FLORIDA STREET ADDRESS*)

2100 Ponce de Leon Blvd Suite 601

Coral Gables, FL 33134

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

NEW Registered Office Address:

2100 Ponce de Leon Blvd Suite 601

Coral Gables, FL 33134

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.

Signature of a member or authorized representative of a member

John R. King
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 605, 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.

Signature of Registered Agent

Jessie King

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

INHS18 (2/14)