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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL

Account Number: 110432003053

Phone : (561)694-8107

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LLC REGISTERED AGENT CHANGE MILLENNIAL SPECIALTY INSURANCE, LLC

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JAN 23 2020

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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 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. N	ame of the limited liability company: MILLENNIAL S	PECIA	LTY	INSURANC	E, LLC		
2. (a)	842 HAMPTON CROSSING WAY		(b)	842 HAMP	ON CROSSING V	VAY	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) ST AUGUSTINE, FL 32092		(0)	Mailing address of limited liabili (Note: MAY RE POST OFF) ST AUGUSTINE, FL 32092			
	12/22/2014		l.	14000193881			
3. 5. (a)	Date of filing/registration in Florida SCHULTZ, BRIAN W	4.	-	Do	ocument number		~
J. (u)	Registered Agent and Registered Office shown on the records of t 842 HAMPTON CROSSING WAY	ept. of State:		SECRE TALL	2020 JAN 22		
	Registered Office Address (MUST BE FLORIDA STREET A			ETARY OF S LAPPSSEE,			
	ST AUGUSTINE, FL		of STA See, Fl	PH 12: 14			
(b)	Corporate Creations Network Inc. Enter name of <u>NEW Registered Agent and/or NEW Registered</u> 801 US Highway 1 <u>NEW Registered Office Address.</u>	Omçe a	ddr	: <u>55</u> :		EL ALE	£
	North Palm Beach , FL.	33408					
agent v	mited liability company is not organized under the law or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liabre.	register bility c f the lir	red (omp nite	office and the sany, it is he d liability co	e business office of reby confirmed the	of the regis	st ere d
Xu	ulling				Attomey-in-Fact		
Signat	ure of a member or authorized representative of a member			Pri	nted or typed name of	f signee	
the obline to mere notified	y accept the appointment as registered agent and agreous of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change. Lauren Underwood, Special Secretary of Registered Agent	e to ac perform for in preby c	t in Ianc Cha Ionfi	this capacity e of my duti pter 605, F. rm that the t	v. I further agree es, and I am famil S. Or, if this docu imited liability ca	to comply lar with ar ment is be impany ha.	with the nd accept ing filed s been
J	- Proceed & Barry						