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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 : (561)694-8107

Fax Number

: (561)694-1639

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

Rmail	Address:			

LLC REGISTERED AGENT CHANGE BRP BLACK INSURANCE, LLC

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Page Count	02
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JAN 24 2020

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

1. The name of the limited liability company is: BRP B	ack Insurance, LLC			
2. (a) Principal office address of the limited liability company:	4010 W. BOY SCOUT BLVD STE 200			
(Note: MUST BE STREET ADDRESS)	TAMPA FL 33607			
(b) Mailing address of limited liability company:	4010 W. BOY SCOUT BLVD STE 200			
(Note: MAY BE POST OFFICE BOX)				
	TAMPA FL 33607			
3/27/2018	L18000076169			
3. Date of filing/registration in Florida	4. Document number			
5.(a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:			
Registered Agent:	WIEBECK, KRIS			
Registered Office Address:	4010 W BOY SCOUT BLYD STEZOO: 23			
	Sig M			
	TAMPA FL 33607			
(b) Enter name of NEW Registered Agent and/or NEW Re	gistered Office address:			
	// ₁ —			
NEW Registered Agent:	Corporate Creations Network Inc.			
NEW Registered Office Address:	801 US Highway 1			
(MUST BE FLORIDA STREET ADDRESS)				
	North Palm Beach FL 33408			
or changes are made, the Florida street address of the registered of identical. Or, in the case of a Florida limited liability company, in an affirmative vote of the members of the limited liability company, the operating agreement of the limited liability company. (Signature of a member or authorized septesentative of a member)	t is bereby confirmed that the change(s) was/were authorized by			
By: Ashley Goldsmith, Attorney-in-Fact (Printed or Typed name of signee)				
I hereby accept the appointment as registered agent and agree to of all statutes relative to the proper and complete performance of my position as registered agent as provided for in Chapter 605. In the registered office address. I hereby confirm that the limited Ashley Gokismith, (Signature of Registered Agent) Division of Corporations, P.O. Bo INHS18(10/99) Corporate Creations International Inc.	Special Scoretary			
801 US Highway 1				
North Palm Beach FL 33408 (561) 694-8107				