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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195 REFERENCE : 1899937 8272342 AUTHORIZATION : Full Blence COST LIMIT : \$ 25.00					
ORDER DATE: November 2, 2021					
ORDER TIME : 9:37 AM					
ORDER NO. : 189993-139					
CUSTOMER NO: 8272342					
CHANGE OF AGENT					
NAME: HARVEST RE HOLDINGS OF FL, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY					

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

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.

Name of the limited liability company: HARVEST RE HOLDINGS OF FL, LLC					
2.	(a)	1155 West Rio Salado Parkway	((b)	
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 201	_		
		Tempe, AZ 85281			
		10/03/2019		L19000239	9554
3.		Date of filing/registration in Florida	4.		Document number
5	(a)	Registered Agent Solutions, Inc.			
J .	(4)	Registered Agent and Registered Office shown on the records of 115 Office Plaza Drive, Suite A			_ e: _
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
		Tallahassee, FL	3230	11	- 702
	(b)				7921-07
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	33 5 1
		Corporation Service Company			M 9: 20
		NEW Registered Office Address:			E. F.
		1201 Hays Street			一一一
		Tallahassee , FL	32301		_
cha age wa	ange ent v s/we	mited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia- tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	register bility co f the lir	red office and ompany, it is nited liability	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
_/s	orized Person				
	•	ure of a member or authorized representative of a member			Printed or typed name of signee
I f pro the to t not	ieret ovisio obli mere tified	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have the property of this change.	ee to ac perform I for in (pereby c orporat:	t in this cape ance of my c Chapter 605 confirm that i ion Service	acity. I further agree to comply with the fulles, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been Company
_	(t. Vice President