

L24000388805

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

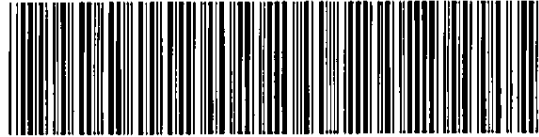
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100441213571

RECEIVED

2025 JAN 27 PM 3:28

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

FILED

2025 JAN 27 AM 11:54

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 923855 8464934
AUTHORIZATION :
COST LIMIT : \$ 25.0

ORDER DATE : January 27, 2025
ORDER TIME : 2:40 PM
ORDER NO. : 923855-004
CUSTOMER NO: 8464934

CHANGE OF AGENT

NAME: ZABELLA LIFE INSURANCE, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt -- EXT#

EXAMINER: _____

**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: ZABELLA LIFE INSURANCE, LLC
2. (a) 2455 E. SUNRISE BLVD
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
SUITE # 411
FORT LAUDERDALE, FL 33304
- (b) 3661 W FORGE RD
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
W FORGE RD
DAVIE, FL 33328
3. 09/05/2024
Date of filing/registration in Florida
4. L24000388805
Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
LIGHT, ERIC
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
621 NW 53RD STREET SUITE # 125
BOCA RATON, FL 33487
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
Corporation Service Company
NEW Registered Office Address:
1201 Hays Street
Tallahassee, FL 32301

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.

/s/ Didier Desrouleaux

Signature of a member or authorized representative of a member

Didier Desrouleaux, Authorized Member

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.

Grace E. Kirby
Signature of Registered Agent

Grace E. Kirby, Asst. Vice President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00 923855

FILED
2025 JAN 27 AM 11:54
TALLAHASSEE, FLORIDA