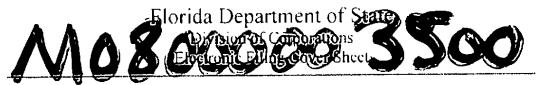
From: Kimberly Laughrey

1/22/2021

Division of Corporations



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From: Kimberly Laughrey

Page, 3 of 3

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.

L Na	name of the limited liability company: INSURANCE SP	ECIAL	ry Group, I	LLC
2. (a)		((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)
	3301 WINDY RIDGE PARKWAY, SE SUITE 100		3301 WIN	DY RIDGE PARKWAY, SE SUITE 100
	ATLANTA, GA 30339-8598	_	ATLANT	A, GA 30339-8598
	07/24/2008		M08000003	3500
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	CORPORATE CREATIONS NETWORK, INC.			
J. (a)	Registered Agent and Registered Office shown on the records of	the Flori	da Dept, of Sta	te:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRE.	<u></u>	20
	801 US IIIGHWAY I			221
	NORTH PALM BEACH , FL	33408		2021 JAN 22
(b)	C T Corporation System			2 / AH
	Enter name of NEW Registered Agent and/or NEW Registered	l Office:	ddress:	94.68 E
	NEW Registered Office Address:			_
	1200 South Pine Island Road		_	_
	Plantation, Fl	33324		_
the ch agent was/w	limited liability company is not organized under the lar ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li- vere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	f the re ability of the l	gistered office company, it imited liabili	is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee
provis the ob- to men notific By: St	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete sligations of my position as registered agent as provide rely reflect a change in the registered office address, I get in writing of this change. CT Corporation System tephanic Boehm, Asst Secretary	ed for i hereby	n (.hapter 60 confirm that	pacity. I further agree to comply with the eduties, and I am familiar with and accept 15, F.S. Or, if this document is being filed the limited liability company has been