## 09000001495

(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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Certified Copies Certificates of Status						
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Office Use Only



800374862738

OCT 25 2021 IALBRITTON CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 111502 7860669

Miller

COST LIMIT

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ORDER DATE : October 15, 2021

ORDER TIME : 9:27 AM

ORDER NO. : 111502-009

CUSTOMER NO: 7860669

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## CHANGE OF AGENT

NAME: ARETE INSURANCE AGENCY LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS:

## 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. 8	lame of the limited liability company: ARETE INSUF	RANCE AC	ENCY LLC			
2. (a)		(t	o)			
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  Fulton Market, 3rd Floor		
	1115 W Fulton Market, 3rd Floor		1115 W F			
	CHICAGO, IL 60607		CHICAGO, IL 60607			
	04/21/2009		M0900000	01495		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a	)					
	Registered Agent and Registered Office shown on the records of C T CORPORATION SYSTEM	of the Florida	Dept. of State	e:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS		_		
	1200 SOUTH PINE ISLAND ROAD					
	PLANTATION , F	33324	-	<del>.</del>	2021 OCT	
				_	100	
(b)	Enter name of NEW Registered Agent and/or NEW Registere		<del></del>	_	22	
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office ad	<u>dress</u> :		<u> </u>	
	Corporation Service Company				AH 10: 24	
	NEW Registered Office Address:	-		_	24	
	1201 Hays Street			_		
	Tallahassee . F	32301				
			<del></del>	<b></b>		
chang agent was/w	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited layere authorized by an affirmative vote of the members teles of organization or the operating agreement of the	e registere lability co of the lim e limited l	ed office and impany, it is ited liability iability com	d the business office of the s hereby confirmed that the y company or as otherwise apany.	registered change(s)	
C:	Jee C Cone	Jill (	Cilmi, Autho	prized Person		
I her provis the ob to men	and a member or authorized representative of a member by accept the appointment as registered agent and agent of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address. I set the writing of this change.	ed for in C hereby co	ince of my a Thapter 605, Infirm that t	Printed or typed name of signed acity. I further agree to conduties, and I am familiar was F.S. Or, if this document the limited liability comparasst. Vice President	mply with the	
Signat	ure of Registered Agent					