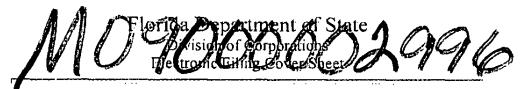
Page 1 of 2

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Help

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: Starr Assist, LLC
2. The Florida document number of this limited liability company is: M09000002996
3. Jurisdiction of its organization: Delaware
4. Date authorized to do business in Florida: 08/04/2009
SECTION II (5-9 complete only the applicable changes)
5. New name of the limited liability company: Starr Insure, LLC (must contain "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "L.L.C.")
6. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida Street Address City Florida City New Registered Agent's Signature if changing Registered Agent's
City Zip Code
i to w reading to the restriction of the contraction of the contractio
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.
If Changing Registered Agent, Signature of New Registered Agent
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

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	Thomas a Bayan Signature of the auth	orized representative	
	Thomas A. Bryan		

Filing Fee: \$25.00



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'STARR GLOBAL ACCIDENT

& HEALTH INSURANCE AGENCY, LLC' FILED A CERTIFICATE OF AMENDMENT,

CHANGING ITS NAME TO 'STARR ASSIST, LLC', ON THE SECOND DAY OF

JUNE, A.D. 2014, AT 4:41 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THE SAID "STARR ASSIST, LLC"

FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "STARR

INSURE, LLC". ON THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2016, AT

1:08 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID 'STARR INSURE, LLC', IS THE LAST KNOWN TITLE OF RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY.

Authentication: 203293331

Date: 11-07-16