M09000003905

(Requestor's Name)					
(Address)					
(Address)					
(Cil	ty/State/Zip/Phone	e #)			
. DICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
·					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
<u> </u>					

Office Use Only



300272911593

RAcharge

05/14/15--01014--017 **25.00



5/20/15



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: May 12, 2015

Order#: 585941-353

Re: GRUPO LATINOAMERICANO DE SEGUROS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Lindsey Lockard

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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.	Na	me of the limited liability company: _GRUPO LATING	DAMERIC	CANO DE SEGUROS, LLC
2	(a)	2650 McCormick Drive	(b)	2650 McCormick Drive
	(4)	Principal office address of limited liability company:	(0)	Mailing address of limited liability company:
		(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)
				Suite 200S
				Suite 2003
		Clearwater, FL 33759		Clearwater, FL 33759
		10/01/2009		M0900003905
3.		Date of filing/registration in Florida	- _{4.} -	Document number
_		Night on D. College Control		· years
5.	(a)	Nathan R Hightower, Esquire		D 4 604
		Registered Agent and Registered Office shown on the records of	the Horida I	Dept. of State:
		2650 McCormick Drive		3
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
		Suite 200S		Dept. of State: FILED F
		Clearwater , FL	33759	T. co
(b) _Corporation Service Company				
Enter name of NEW Registered Agent and/or NEW Registered Office address:				
				_
		1201 Hays Street		
		NEW Registered Office Address:		
		<u> </u>		
		Tallahassee , FL	32301	
1.0	.1 1.	S 18 196	6.1 6	0
		mited liability company is not organized under the lav nge or changes are made, the Florida street address of		
ag	ent w	vill be identical. Or, in the case of a Florida limited lia	ability con	mpany, it is hereby confirmed that the change(s)
Wa	ıs/we	re authorized by an affirmative vote of the members of	of the limit	ted liability company or as otherwise provided in
ine		cles of organization or the operating agreement of the	limited lia	ability company.
		aughe a Lan	Elizal	beth A. Dawson, Authorized Person
:	Signat	ure of a member or authorized representative of a member		Printed or typed name of signee
pro the to	oviși e obli mere	by accept the appointment as registered agent and agrons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I is	ee to act i performa d for in Ci hereby coi	in this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been
	•	fin writing of this change.		
Si	<u> </u>	hoe C-Kuby	BY: Gr	ace F Kirby Asst VP

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00