M1200000 4856

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
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Special Instructions to Filing Officer:								

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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Baronie lindsey.baronie@cscglobal.com

Date: April 16, 2020

Order#: 246805-002

Re: PARTNERS ADVANTAGE INSURANCE SERVICES, 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 File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Lindsey Baronie

c/o Corporation Service Company

251 Little Falls Drive 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.

l,	Na	me of the limited liability company: PARTNERS ADV	VANTAG	E INSURA	NCE SERVICES,	LLC		
2	(a)	1825 Chicago Avenue		1825 CI	1825 Chicago Avenue			
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		Suite 240	_	Suite 240)			
		Riverside CA 92507		Riverside	e, CA 92507			
		August 28, 2012	M12000004856					
3.		Date of filing/registration in Florida	4.		Document number	r	-	
5.	(a)	Dan Tucker						
	(4)	Registered Agent and Registered Office shown on the records of th	he Florida	Dept. of State	E			
		500 S. Australian Avenue						
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)					
		Suite 542						
		West Palm Beach , FL_	33401		_	· ::	207	
	(b)	Corporation Service Company					2020 :::	
		Enter name of NEW Registered Agent and/or NEW Registered (Office add	ress:	•		2.5	
							0	;
		1201 Hays Street			_			
		NEW Registered Office Address:					Ţ.	-
			<u></u>		-	: ·	C)	
		Tallahassee , FL	32301					
the ag	e cha ent v as/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of celes of organization or the operating agreement of the l	s of the the the registry conditions the first	ered office npany, it is ted liability	e and the business s hereby confirme y company or as o	office d that	e of the the cha	registered inge(s)
					rized Person			
	Signa	ture of a member or authorized representative of a member			Printed or typed nam	ne of sig	gnee	
pr th to no	ovisi e obl mere tified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address. In a myling of this change	ee to act performa I for in C pereby co	in this cape nce of my c hapter 605 nfirm that	acity. I further ag duties, and I am fo f, F.S. Or, if this o the limited liabilit	ree to umilia locum y com	compler with in the control of the c	y with the and accept peing filed as been
Si	gnatu	Turden M. Barothe re of Registere Agent Corporation Service Company	BY: L	ndsey M.	Baronie, Asst. V	/ice P	reside	nt