117000006756

(Re	questor's Name)			
(Address)				
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2019 SEP 18 ANTH: 5



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Soraya Sariaslani soraya.sariaslani@cscqlobal.com

Date: September 17, 2019

Order#: 873452-249

Re: ECC INSURANCE BROKERS, LLC

Enclosed please find:

<u>XX</u> 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: Soraya Sariaslani 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.

OUCA.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	ame of the limited liability company: _ECC INSURAN	NCE BROK	ERS, LLC	
2. (a)	ONE TOWER LANE, SUITE 2850	(b)	220 S. Ridgewood Ave	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited fiability company: (Note: MAY BE POST OFFICE BOX)	
	OAKBROOK TERRACE, IL 60181		Daytona Beach, FL 32114	
	08/08/2017		M17000006756	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	C T CORPORATION SYSTEM			
	Registered Agent and Registered Office shown on the records of	f the Florida f	Dept. of State:	
	1200 SOUTH PINE ISLAND ROAD			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	PLANTATION , FI	33324	ZE SE	
(b)	Corporation Service Company			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office addr	TASSITION AND ST	
	1201 Hays Street		esta Oi gari	
	NEW Registered Office Address:			
	Tallahan			
	Tallahassee	,_32301_		
the cha agent v was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	f the registe ability com of the limited lia	red office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in bility company.	
Signat	ure of a mymber or authorized representative of a member	JIII CII	mi, Authorized Person Printed or typed name of signee	
I herel provisi the obli to mere notified	by accept the appointment as registered agent and agents of all statutes relative to the proper and complete igations of my position as registered agent as provide the reflect a change in the registered office address. It is writing of this change.	performan d for in Ch hereby con	n this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been	

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