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(Requestor's Name)

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(City/State/Zip/Phone #)

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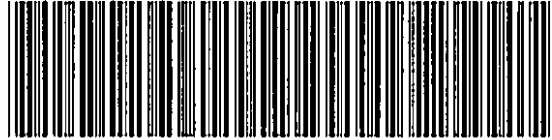
(Business Entity Name)

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Y. SULKER

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 23, 2019

SPENCER FANE LLP
ATTN: LORI ANN ARNOLD
1000 WALNUT STREET, SUITE 1400
KANSAS CITY, MO 64106

SUBJECT: VECTOR RISK SOLUTIONS, LLC
Ref. Number: M18000010297

We have received your document for VECTOR RISK SOLUTIONS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the company has to match with the document number.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 619A00021825

REC-31
10/31/19 -
Corrected & resubmitted -
Thank you -

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. Name of the limited liability company: VECTOR RISK SOLUTIONS, LLC

2. (a) 9401 INDIAN CREEK PARKWAY (b)

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

BUILDING 40, SUITE 700

PO BOX 12847

OVERLAND PARK, KS 66210

OVERLAND PARK, KS 66282

10/31/2018

M18000010297

3. Date of filing/registration in Florida 4. Document number

5. (a) Capitol Corporate Services, Inc.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Capitol Services, Inc.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

515 EAST PARK AVENUE 2ND FL

TALLAHASSEE FL 32301

(b) Spencer Fane

Enter name of NEW Registered Agent and/or NEW Registered Office address:

Spenserv, Inc.

NEW Registered Office Address:

201 North Franklin Street, Suite 2150

Tampa FL 33602-5627

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Printed or typed name of signee

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.

Signature of Registered Agent
Spenserv, Inc., by: Peter K. Hartweger, Vice President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00