Division of Corporations

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Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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LLC REGISTERED AGENT CHANGE **ICG OPERATIONS LLC**

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AUG 0 2 2023

K. Brumbley

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. N	ame of the limited liability company: ICG OPERATIO	INS LLC			
2. (a)	717 FIFTH AVENUE FL 18	(b) 300 N MAIN STREET STE 402			
•	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	\	Mailing address of limited (Note: MAY BE POST		
	NEW YORK, NY 10022	G	REENVILLE, SC 29601		
	12/21/2021	 M2	2000001647		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	C T CORPORATION SYSTEM				
-r. (a)	Registered Agent and Registered Office shown on the records of	the Florida De	pt. of State:		
	1200 SOUTH PINE ISLAND ROAD				
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS)			
(b)	PLANTATION . FL	33324			
	United Agent Group Inc.			2023	
	Enter name of NEW Registered Agent and/or NEW Registered	Office addres	<u>s</u> :	AP 1023 AUG 1520 KG	
	801 US Highway 1			APPROVED AMD FILED FILED PM	
	NEW Registered Office Address:		-	bH 2:	
	North Palm Beach , FL	33408			
change agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registered o ability compa of the limited	ffice and the business office of any, it is hereby confirmed that I liability company or as other	of the registered at the change(s)	
4	Glenda Wernikoff Signature of a member of a member		Glenda Wernikoff, Attorney	enda Wernikoff, Attorney-in Fact	
Signa	ture of a member of atthorized representative of a member		Printed or typed name of	signee	
provisi the obl to mero notified	by accept the appointment as registered agent and agree ins 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 had no writing of this change. Glenda Wernikoff Glenda Wernikoff, Special S	performance I for in Chaj iereby confii	his capacity. I further agree to of my duties, and I am famili toter 605, F.S. Or, if this document that the limited liability contains the liability liability contains the liability contains the liability liability contains the liability contains the liability liability contains the liability l	o comply with the ar with and accept ment is being filed mpany has been	

Signature of Registered Agent