



Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

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Account Name : COMPUTERSHARE
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2023 DEC 15 PM 4:30

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT CHANGE
CROSSCOVER INSURANCE SERVICES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2023 DEC 15 AM 10:43

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: CrossCover Insurance Services, LLC

2. (a) 1201 19th Place, Suite A110 (b) 300 North Beach Street

Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

Vero Beach, FL 32960 Daytona Beach, FL 32114

03/22/2022 M22000004294

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

5. (a) Corporation Service Company
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1201 Hays Street

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Tallahassee, FL 32301-2525

(b) Corporate Creations Network Inc.

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

801 US Highway 1

NEW Registered Office Address:

North Palm Beach, FL 33408

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]
Signature of a member or authorized representative of a member

Saray Djidji, Attorney in Fact

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]
Signature of Registered Agent

Saray Djidji, Special Secretary