

9/27/23, 11:55 AM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

M22000033685

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((1123000339652 3)))



H230003396523AB00

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : URS AGENTS LLC
Account Number : 120150000127
Phone : (800)567-4397
Fax Number : (800)567-4398

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: compliancedept@semperpublicadjusters.com

LLC REGISTERED AGENT CHANGE SEMPER FI PUBLIC ADJUSTERS SOUTHEAST, LLC

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

[Electronic Filing Menu](#)[Corporate Filing Menu](#)[Help](#)

SEP 28 2023

K. Brumley

(((H23000339652 3)))

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: SEMPER FI PUBLIC ADJUSTERS SOUTHEAST, LLC

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

3967 GATES AVENUE
CHIPLEY, FL 34248-3121

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

34 SHINING WILLOW WAY #289
LA PLATA, MD 20646

08/31/2022

M22000013685

3. Date of filing/registration in Florida

4. Document number

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

JOSEPH L. KRINER

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3927 GATES AVENUE

CHIPLEY, FL 32428-3121

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

URS AGENTS, LLC

NEW Registered Office Address:

3458 LAKESHORE DRIVE

TALLAHASSEE, FL 32312

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

Joseph L Kriner
Printed or typed name of signer

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.

Georgina Vega, Asst. Secretary

Signature of Registered Agent

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

FILING FEE: \$25.00

(((H23000339652 3)))