

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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Account Name : C T CORPORATION SYSTEM

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REGISTERED AGENT CHANGE

HUB INTERNATIONAL FLORIDA, INC.

Certificate of Status	0
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C. Coufficte JUL 0 7 2008

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chil	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statunge is submitted for a corporation organized under the laws of the State of $\overline{ m Flori}$ or to change its registered office or registered agent, or both, in the State of Florid		,, , ,, =, ,			
	he corporation: Hub International Florida, Inc.			<u> </u>		
2. The principal	2. The principal office address: 55 EAST JACKSON BOULEVARD CHICAGO IL 60604					
3. The malling a	ddress (if different):					
4. Date of incorp	poration/qualification: 06/28/06 Document number: P0600008748	15				
	street address of the current registered agent and registered office on file with them to State;	ne				
	CORPORATION SERVICE COMPANY					
	1201 HAYS ST TALLAHASSEE, PL 32301					
		SE	9			
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	SE	الله	entern S		
	C T Corporation System	SEE YY	ω 	Same a		
•	c/o C T Corporation System, 1200 South Pine Island Road)F S	£ 9			
	(P.O. Box NOT soueptable)	OR A	9: 2			
	Plantation, Florida 33324	95	9 .	•		
The street addre as changed will	ss of its registered office and the street address of the business office of its re be identical.	gistered	agent,	ı		
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an off e board, or the corporation has been notified in writing of the change.	icer so				
	Kimberly Brounling, Vice President (Printed or typed name and title)					
	the appointment as registered agent and agree to act in this capacity, o comply with the provisions of all statutes relative to the proper and complet I am familiar with and accept the obligation of my position as registered as it is filled merely to reflect a change in the registered office address, I hereby to been notified in writing of this change.		rmanci r, if thi ihat the	e 3		
By: Me	Assistant Secretary Assistant Secretary		<u> </u>			
If signing on bei	nalf of an entity.					
(L)	yped or Printed Name)					
	* * * FILING FEE; \$35.00 * * *					

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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CR2E045 (8/05)