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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Baronie lindsey.baronie@cscglobal.com

Date: November 6, 2018

Order#: 427486/020

Re: SUMMIT HOLDING GROUP, INC.

Enclosed please find:

XX ___ Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Baronie c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Flor corganized under the laws of the State registered agent, or both, in the State	of FL
1. The name of	the corporation: SUMMIT HOLDIN	IG GROUP, INC.	
	office address: ral Hwy Suite 500 Boca Raton FL 3	33432	
3. The mailing a	address (if different):		
4. Date of incorporation/qualification: 12/30/1999 Document number:			000111812
	I street address of the current regist runent of State: (If resigned, enter r	tered agent and registered office on fil resigned)	e with the
	JACOBS STEVEN C		1
	595 S FEDERAL HWY		TILE SECRETARIANS
	BOCA RATON	FL 33432	
6. The name and (if changed):	I street address of the new registere	ed agent (if changed) and /or registered	
	Corporation Service Company		02 一
	1201 Hays Street		
	P.O Bo Tallahassee	ov NOT acceptable FL 32301	
	Talianassee	1	
The street address changed will	ess of its registered office and the sbe identical.	street address of the business office of	of its registered agent.
Such change wa authorized by th	as authorized by resolution duly ac ne board, or the corporation has be	dopted by its board of directors or by een notified in writing of the change.	an officer so
Xie	. E. agni	Jill Cilmi	Vice President
I hereby accept I further agree to performance of agent. Or, if the hereby confirm	to comply with the provisions of all my duties, and I am familiar with	Printed or typed name are ent and agree to act in this capacity. It statutes relative to the proper and a and accept the obligation of my posi to reflect a change in the registered of ified in writing of this change.	complete tion as registered
By: Linds	ey M. Baronie	10/25/2018	
Stgr	nature of Registered Agent	Date	
If signing on be	half of an entity:		
Lindsey M. Bard	onie, Asst. Vice President		
	yped or Printed Name		

* * * FILING FEE: \$35.00 * * *