2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2015
Secretary of State
CC5190385829

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Entity Name: PUBLIC RISK UNDERWRITERS, LLC

Current Principal Place of Business:

615 CRESCENT EXECUTIVE COURT, SUITE 600
LAKE MARY, FL 32746

Current Mailing Address:

615 CRESCENT EXECUTIVE COURT, SUITE 600
LAKE MARY, FL 32746 US

FEI Number: 26-0893235

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MANAGING MEMBER
Name	BROWN & BROWN,INC.
Address	220 S. RIDGEWOOD AVE.
City-State-Zip:	DAYTONA BEACH FL 32114

Title	MANAGER
Name	BOONE, SAM R JR.
Address	200 S. RIDGEWOOD AVENUE
City-State-Zip:	DAYTONA BEACH FL 32114

Title	MANAGER
Name	BOONE, SAM R JR.
Address	200 S. RIDGEWOOD AVENUE
City-State-Zip:	DAYTONA BEACH FL 32114

Title	MANAGER
Name	GRAMMIG, LAUREL L
Address	655 N. FRANKLIN STREET SUITE 1900
City-State-Zip:	TAMPA FL 33602

Title	MANAGER
Name	GRAMMIG, LAUREL L
Address	655 N. FRANKLIN STREET SUITE 1900
City-State-Zip:	TAMPA FL 33602

Title	ASSISTANT SECRETARY
Name	ROBINSON, ANTHONY
Address	220 S. RIDGEWOOD AVE.
City-State-Zip:	DAYTONA BEACH FL 32114

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY ROBINSON ASSISTANT SECRETARY 04/23/2015

Electronic Signature of Signing Authorized Person(s) Detail — Date