

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000304845

**Entity Name:** BRP SPECIALTY WHOLESALE, LLC

**Current Principal Place of Business:**

4010 W. BOY SCOUT BLVD., STE. 200  
TAMPA, FL 33607

**Current Mailing Address:**

4010 W. BOY SCOUT BLVD., STE. 200  
TAMPA, FL 33607 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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           | MANAGER                                  | Title           | MEMBER                                   |
| Name            | BRP INSURANCE INTERMEDIARY HOLDINGS, LLC | Name            | BRP INSURANCE INTERMEDIARY HOLDINGS, LLC |
| Address         | 4010 W. BOY SCOUT BLVD., STE. 200        | Address         | 4010 W. BOY SCOUT BLVD., STE. 200        |
| City-State-Zip: | TAMPA FL 33607                           | City-State-Zip: | TAMPA FL 33607                           |

*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:** BRP INSURANCE INTERMEDIARY HOLDINGS, LLC      MANAGER, BY SAVANAH      05/20/2020  
KELLEY, ATTORNEY-IN-FACT

Electronic Signature of Signing Authorized Person(s) Detail

Date