#### 2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# M0000001720

### Entity Name: CHAMBER INSURANCE AGENCY SERVICES, LLC

# Current Principal Place of Business:

20 COMMERCE DRIVE SUITE 200 CRANFORD, NJ 07016

# **Current Mailing Address:**

20 COMMERCE DRIVE SUITE 200 CRANFORD, NJ 07016 US

### FEI Number: 22-3746022

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

### Authorized Person(s) Detail :

/ (attro: 120 a 1			
Title	MGR	Title	MGR, SR VP
Name	ASSUREDPARTNERS CAPITAL, INC.	Name	HENDERSON, JIM W
Address	200 COLONIAL CENTER PARKWAY SUITE 150	Address	200 COLONIAL CENTER PARKWAY SUITE 150
City-State-Zip:	LAKE MARY FL 32746	City-State-Zip:	LAKE MARY FL 32746
Title	MANAGER, SENIOR VP, SECRETARY	Title	MANAGER, SENIOR VP
Name	RILEY, THOMAS E	Name	VREDENBURG, PAUL
Address	200 COLONIAL CENTER PARKWAY SUITE 150	Address	200 COLONIAL CENTER PARKWAY SUITE 150
City-State-Zip:	LAKE MARY FL 32746	City-State-Zip:	LAKE MARY FL 32746
Title	SENIOR VP	Title	CHIEF CORPORATE COUNSEL
Name	CURTIS, DEAN	Name	KINNETT, STANLEY K II
Address	200 COLONIAL CENTER PARKWAY SUITE 150	Address	200 COLONIAL CENTER PARKWAY SUITE 150
City-State-Zip:	LAKE MARY FL 32746	City-State-Zip:	LAKE MARY FL 32746
Title	CHIEF COUNSEL, ASST. SECRETARY	Title	CO-CEO, MANAGER, DIRECTOR
Name	SMITH, WALTER	Name	MCDONALD, JOHN O
Address	200 COLONIAL CENTER PARKWAY SUITE 150	Address	20 COMMERCE DRIVE SUITE 200
City-State-Zip:	LAKE MARY FL 32746	City-State-Zip:	CRANFORD NJ 07016

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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: EUGENE W BEBOUT

CFO, SR VP

01/09/2015

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Jan 09, 2015 Secretary of State CC1400957908

Certificate of Status Desired: No

# Authorized Person(s) Detail Continued :

Title	CO-CEO, MANAGER, DIRECTOR	Title	CFO, SENIOR VP
Name	PATTWELL, SEAN M	Name	BEBOUT, EUGENE W
Address	20 COMMERCE DRIVE SUITE 200	Address	20 COMMERCE DRIVE SUITE 200
City-State-Zip:	CRANFORD NJ 07016	City-State-Zip:	CRANFORD NJ 07016