MGR

SIGNATURE: JAMES BOWEN

Electronic Signature of Signing Authorized Person(s) Detail

# FEI Number: 32-0543067

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH 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:

Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	BOWEN, JAMES	Name	MCAULAY, JEFFREY	
Address	695 ATLANTIC AVE 9TH FLOOR	Address	695 ATLANTIC AVE 9TH FLOOR	
City-State-Zip:	BOSTON MA 02111	City-State-Zip:	BOSTON MA 02111	

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.

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M17000009194

## Entity Name: RE3 ENERGETIC INSURANCE SOLUTIONS, LLC

#### **Current Principal Place of Business:**

695 ATLANTIC AVE 9TH FLOOR BOSTON, MA 02111

#### **Current Mailing Address:**

695 ATLANTIC AVE 9TH FLOOR BOSTON, MA 02111 US

## Certificate of Status Desired: No

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FILED Apr 03, 2019 Secretary of State 0694773294CC

Date

Date

04/03/2019