

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000032885

FILED
Apr 15, 2011
Secretary of State

Entity Name: MATRIX INSURANCE CONSULTING, LLC

Current Principal Place of Business:

17592 MIDDLE LAKE DRIVE
BOCA RATON, FL 33496

New Principal Place of Business:

17592 MIDDLE LAKE DRIVE
BOCA RATON, FL 33496 US

Current Mailing Address:

17592 MIDDLE LAKE DRIVE
BOCA RATON, FL 33496

New Mailing Address:

PO BOX 880625
BOCA RATON, FL 33488-062 US

FEI Number: 26-4607786

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMILLERI, MICHAEL
17592 MIDDLE LAKE DRIVE
BOCA RATON, FL 33496 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: CAMILLERI, MICHAEL
Address: 17592 MIDDLE LAKE DRIVE
City-St-Zip: BOCA RATON, FL 33496

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: MICHAEL CAMILLERI

MGRM

04/15/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date