

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000031427

FILED
Feb 16, 2010
Secretary of State

Entity Name: 1 STOP INSURANCE SERVICES, LLC.

Current Principal Place of Business:

14827 N. FLORIDA AVE.
TAMPA, FL 33613 US

New Principal Place of Business:

Current Mailing Address:

14827 N. FLORIDA AVE.
TAMPA, FL 33613 US

New Mailing Address:

FEI Number: 20-4593472 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DYKSTRA, DONALD
14827 N FLORIDA AVE
TAMPA, FL 33613 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: DYKSTRA, DONALD
Address: 14827 N FLORIDA AVE
City-St-Zip: TAMPA, FL 33613 US

Title: MGRM
Name: DYKSTRA, NORMA
Address: 14827 N FLORIDA AVE
City-St-Zip: TAMPA, FL 33613 US

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: DONALD DYKSTRA MGRM 02/16/2010

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