**Current Mailing Address:** 

Entity Name: MAD INSURANCE INC

**Current Principal Place of Business:** 

DOCUMENT# P13000046903

7500 NW 25 ST 102 MIAMI, FL 33122 US

7500 NW 25 ST

MIAMI, FL 33122

102

### FEI Number: 80-0927850

### Name and Address of Current Registered Agent:

DONOSO, MIKE A 7500 NW 25 ST 102 MIAMI, FL 33122 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

Officer/Director Detail :			
Title	P, S	Title	VP, T
Name	DONOSO, MIKE A	Name	DONOSO, ABDIEL A JR.
Address	7500 NW 25 ST 102	Address	7500 NW 25 ST 102
City-State-Zip:	MIAMI FL 33122	City-State-Zip:	MIAMI FL 33122

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. PRESIDENT

### SIGNATURE: MIKE A DONOSO

Electronic Signature of Signing Officer/Director Detail

## FILED Mar 11, 2015 Secretary of State CC4303592316

Certificate of Status Desired: No

Date