

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000059757

Entity Name: BEST QUALITY INSURANCE GROUP LLC

Current Principal Place of Business:

8181 NW 36 STREET
1010
DORAL, FL 33166

Current Mailing Address:

8181 NW 36 STREET
1010
DORAL, FL 33166

FEI Number: 35-2299728

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GRELA, MARIA J
14464 SW 15 ST
MIAMI, FL 33184 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

Date

Authorized Person(s) Detail :

Title MGR
Name GRELA, MARIA J
Address 8181 NW 36 STREET, SUITE 1010
City-State-Zip: DORAL FL 33166

Title MGRM
Name NOGUEIRA, YAIMA
Address 8181 NW 36 STREET, SUITE 1010
City-State-Zip: DORAL FL 33166

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: MARIA J GRELA

PRESIDENT

01/07/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date