

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000102067

Entity Name: MIRANDA'S INSURANCE SERVICES, LLC.

Current Principal Place of Business:

12434 SCOTTISH PINE LANE
CLERMONT, FL 34711

Current Mailing Address:

12434 SCOTTISH PINE LANE
CLERMONT, FL 34711 US

FEI Number: 26-1193026

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MIRANDA, PILAR
12434 SCOTTISH PINE LANE
CLERMONT, FL 34711 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 MGRM
Name MIRANDA, PILAR
Address 12434 SCOTTISH PINE LANE
City-State-Zip: CLERMONT FL 34711

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: PILAR MIRANDA

MGRM

02/04/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date