

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000125279

**Entity Name:** GLOBAL RISK LLC

**Current Principal Place of Business:**

5959 BLUE LAGOON DR  
SUITE 101  
MIAMI, FL 33126

**Current Mailing Address:**

5959 BLUE LAGOON DR  
SUITE 101  
MIAMI, FL 33126 US

**FEI Number:** 26-1586417

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BAINBRIDGE, GAYLE MEMBER  
5959 BLUE LAGOON DR  
SUITE 101  
MIAMI, FL 33126 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:** GAYLE A BAINBRIDGE

01/24/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name BAINBRIDGE INSURANCE, LLC  
Address 8401 SW 65 STREET  
City-State-Zip: MIAMI FL 33143

Title MGR  
Name TONYMART, LLC  
Address 5296 SE ORANGE STREET  
City-State-Zip: STUART FL 34997

Title MGR  
Name PORTAS INSURANCE AGENCY, INC.  
Address P O BOX 527501  
City-State-Zip: MIAMI FL 33152

*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:** GAYLE A BAINBRIDGE

MEMBER

01/24/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date