

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000021287

Entity Name: BLACK INSURANCE AND FINANCIAL SERVICES, LLC

Current Principal Place of Business:

5833 ARGERIAN DRIVE STE 102
WESLEY CHAPEL, FL 33545

Current Mailing Address:

5833 ARGERIAN DRIVE STE 102
WESLEY CHAPEL, FL 33545

FEI Number: 35-2328104

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLACK, CHRISTOPHER R
30617 BITTSBURY CT
WESLEY CHAPEL, FL 33543 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 BLACK, CHRISTOPHER R
Address 30617 BITTSBURY CT
City-State-Zip: WESLEY CHAPEL FL 33543

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: CHRISTOPHER R BLACK

MANAGING MEMBER

01/13/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date