

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000023051

Entity Name: COMPREHENSIVE INSURANCE CONSULTANTS, LLC

Current Principal Place of Business:

12820 TROTTER BLVD
DAVIE, FL 33330

Current Mailing Address:

12820 TROTTER BLVD.
DAVIE, FL 33330 US

FEI Number: 20-2093222

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, ELIZABETH
12820 TROTTER BLVD
DAVIE, FL 33330 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	Title	MGRM
Name	GARCIA, ELIZABETH	Name	ALVAREZ, VERONICA
Address	12820 TROTTER BLVD	Address	12820 TROTTER BLVD
City-State-Zip:	DAVIE FL 33330	City-State-Zip:	DAVIE FL 33330

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: ELIZABETH GARCIA

MGRM

02/06/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date