

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000021907

**Entity Name:** INSIGHT SPECIALTY PROGRAMS, LLC

**Current Principal Place of Business:**

4230 LBJ FWY  
SUITE 222  
DALLAS, TX 75244

**FILED**  
**Feb 15, 2017**  
**Secretary of State**  
**CC2401041074**

**Current Mailing Address:**

4230 LBJ FWY  
SUITE 222  
DALLAS, TX 75244

**FEI Number: 26-4396372**

**Certificate of Status Desired: Yes**

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

NEAL, COREY T  
1425 PIEDMONT DRIVE  
201-B  
TALLAHASSEE, FL 32308 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           MEMB  
Name           JDI RISK ADVISORS, LLC  
Address        4230 LBJ FWY, STE 222  
City-State-Zip: DALLAS TX 75244

Title           MEMB  
Name           ROCKWELL SCRIBNER, LLC  
Address        160 BELDEN HILL ROAD  
City-State-Zip: WILTON CT 06897

*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: MICHAEL J. DILORETO**

**COO**

**02/15/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date