

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000044623

**Entity Name:** IFB INSURANCE SERVICES, LLC

**Current Principal Place of Business:**

777 SW 37TH AVE  
SUITE 700  
MIAMI, FL 33135

**Current Mailing Address:**

777 SW 37TH AVE  
SUITE 700  
MIAMI, FL 33135 US

**FEI Number:** 27-1172767

**Certificate of Status Desired:** No

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

INTERAMERICAN CORPORATE SERVICES LLC  
2525 PONCE DE LEON BLVD.,  
SUITE 1225  
CORAL GABLES, FL 33134 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:** ASNARDO GARRO

03/21/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title TREA  
Name SKIPPER, CHARLES  
Address 777 SW 37TH AVE  
SUITE 700  
City-State-Zip: MIAMI FL 33135

Title MANAGER  
Name ALFONSO, ALEX  
Address 777 SW 37TH AVE  
SUITE 700  
City-State-Zip: MIAMI FL 33135

*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:** ALFONSO , ALEX

MANAGER

03/21/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date