

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000093752

Entity Name: SENTINEL INSURANCE GROUP, LLC

Current Principal Place of Business:

1900 GLADES ROAD
SUITE 101
BOCA RATON, FL 33431

Current Mailing Address:

1900 GLADES ROAD
SUITE 101
BOCA RATON, FL 33431

FEI Number: 27-3322919

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADKINS, PATRICIA
1900 GLADES ROAD
SUITE 101
BOCA RATON, FL 33431 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
Name ADKINS, PATRICIA
Address 1900 GLADES ROAD SUITE 101
City-State-Zip: BOCA RATON FL 33431

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: PATRICIA ADKINS

MANAGER

02/15/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date