2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000114404

Entity Name: VEN INSURANCE PARTNERS LLC

Current Principal Place of Business:

1900 GLADES RD SUITE 353

BOCA RATON, FL 33431

Current Mailing Address:

1900 GLADES RD SUITE 353 BOCA RATON, FL 33431 US

FEI Number: 27-3903308 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KNOTSCHKE, HENRIQUE 1900 GLADES RD SUITE 353 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

FILED Mar 14, 2016

Secretary of State

CC8116826285

Authorized Person(s) Detail:

Title MGRM Title **MGRM**

MASSIANI, GUSTAVO Name KNOTSCHKE, HENRIQUE LMR. Name Address

1900 GLADES RD SUITE 353 1900 GLADES RD Address **SUITE 353**

BOCA RATON FL 33431

Name

City-State-Zip: City-State-Zip: BOCA RATON FL 33431

Title **MGRM**

Title **MGRM** Name SCHNAPP, ROBERTO

CARPIO, ANDREINA 1900 GLADES RD Address Address 1900 GLADES RD

SUITE 353 **SUITE 353**

BOCA RATON FL 33431 City-State-Zip:

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: HENRIQUE KNOTSCHKE Electronic Signature of Signing Authorized Person(s) Detail DIRECTOR

03/14/2016