2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2014
Secretary of State
CC7292525386

DOCUMENT# L11000023240

Entity Name: FOCUS INSURANCE AGENCY, LLC

Current Principal Place of Business:

4801 S. UNIVERSITY DR., #140
DAVIE, FL 33328

Current Mailing Address:

4801 S. UNIVERSITY DR., #140
DAVIE, FL 33328 US

FEI Number: 27-5124196

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZIMMERMAN, STEPHEN L
737 EAST ATLANTIC BLVD.
POMPANO BEACH, FL 33060 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	CARNEY, JAMES K	Name	XU, LIPING
Address	8125 S.W. 29TH STREET	Address	8125 S.W. 29TH STREET
City-State-Zip:	MIRAMAR FL 33025	City-State-Zip:	MIRAMAR FL 33025

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: JAMES K CARNEY MGRM 04/19/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date