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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MANAGER

SIGNATURE: MICHELE L HALL

Electronic Signature of Signing Authorized Person(s) Detail

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000030935

Entity Name: SERENITY INSURANCE AND BONDING AGENCY, LLC

Current Principal Place of Business:

909 LAKE SHORE DR #113 LAKE PARK, FL 33403

Current Mailing Address:

PO BOX 1140 PALM CITY, FL 34991 US

FEI Number: 45-4654118

Name and Address of Current Registered Agent:

HALL, MICHELE L 909 LAKE SHORE DR #113 LAKE PARK, FL 33403 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: MICHELE L HALL

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

TitleMGRNameHALL, MICHELE LAddressPO BOX 1140City-State-Zip:PALM CITY FL 34991

FILED Apr 07, 2013 Secretary of State CC5211834872

Certificate of Status Desired: No

04/07/2013

Date

04/07/2013 Date