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.

CEO

SIGNATURE: RAJENDRA SINGH

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L12000062013

Entity Name: RAJ SINGH INSURANCE ASSOCIATES,LLC

Current Principal Place of Business:

1678 E. SILVER STAR RD UNIT # 107 OCOEE, FL 34761

Current Mailing Address:

2081 SUNBOW AVENUE APOPKA, FL 32703 US

FEI Number: 45-5225896

Name and Address of Current Registered Agent:

SINGH, RAJENDRA 2081 SUNBOW AVENUE APOPKA, FL 32703 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

Authorized Person(s) Detail :

Title	MGR	Title	CEO
Name	SINGH, NALINI D	Name	SINGH, RAJENDRA
Address	2081 SUNBOW AVENUE	Address	2081 SUNBOW AVENUE
City-State-Zip:	APOPKA FL 32703	City-State-Zip:	APOPKA FL 32703

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 03, 2016 Secretary of State CC7873205738

Certificate of Status Desired: No

Date