

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000064510

Entity Name: ALL INSURANCE SOLUTIONS LLC

Current Principal Place of Business:

961 N.E. 142ND ST
NORTH MIAMI, FL 33161

Current Mailing Address:

961 N.E. 142ND ST
NORTH MIAMI, FL 33161 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMIREZ, ADRIANA
961 N.E. 142ND ST
NORTH MIAMI, FL 33161 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: ADRIANA RAMIREZ

04/13/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name RAMIREZ, ADRIANA L
Address 961 N.E. 142ND ST
City-State-Zip: NORTH MIAMI FL 33161

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: ADRIANA RAMIREZ

04/13/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date