

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000102531

Entity Name: RISK TRANSFER HOLDINGS, LLC

Current Principal Place of Business:

219 EAST LIVINGTON STREET
ORLANDO, FL 32801

Current Mailing Address:

219 EAST LIVINGTON STREET
ORLANDO, FL 32801

FEI Number: 59-3722041

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOWMAN, WILLIAM R
1000 LEGION PLACE 1700
ORLANDO, FL 32801 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 MGR
Name HUGHES, PAUL R
Address 219 EAST LIVINGTON STREET
City-State-Zip: ORLANDO FL 32801

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: PAUL R HUGHES

MANAGER

01/09/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date