2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 12, 2016
Secretary of State
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Entity Name: 1BRICK INSURANCE, LLC

Current Principal Place of Business:

29750 US HWY. 19 N.
203
CLEARWATER, FL 33761

Current Mailing Address:

29750 US HWY. 19 N.
203
CLEARWATER, FL 33761 US

FEI Number: 80-0851190

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOLFE, RANDY
100 N. TAMPA ST.
2700
TAMPA, FL 33602 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
Name	KOKO, JORDAN
Address	29750 US HWY. 19 N. 203
City-State-Zip:	CLEARWATER FL 33761

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: JORDAN KOKO MGRM 03/12/2016

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