

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000135214

Entity Name: PECO INSURANCE, LLC.

Current Principal Place of Business:

10237 BERMUDA DR
COOPER CITY, FL 33026

Current Mailing Address:

10237 BERMUDA DR
COOPER CITY, FL 33026

FEI Number: 46-1253033

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BATISTA, JULIO C
14003 SW 49 STREET
MIRAMAR, FL 33027 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 CHAPMAN, JOSE
Address 10237 BERMUDA DR
City-State-Zip: COOPER CITY FL 33026

Title MGRM
Name BATISTA, JULIO
Address 14003 SW 49 STREET
City-State-Zip: MIRAMAR FL 33027

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.

SIGNATURE: JOSE CHAPMAN

PRESIDENT

04/29/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date