

**2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000143005

**Entity Name:** VERTICAL INSURANCE & FINANCIAL SERVICES, LLC

**Current Principal Place of Business:**

3075 W OAKLAND PARK BLVD, SUITE 103  
OAKLAND PARK, FL 33311

**Current Mailing Address:**

3075 W OAKLAND PARK BLVD, SUITE 103  
OAKLAND PARK, FL 33311 US

**FEI Number:** 46-1382556

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FERRER, ESTEBAN  
3075 W OAKLAND PARK BLVD, SUITE 103  
OAKLAND PARK, FL 33311 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:** ESTEBAN FERRER

10/11/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name FERRER, ESTEBAN  
Address 3075 W OAKLAND PARK BLVD, SUITE  
103  
City-State-Zip: OAKLAND PARK FL 33311

*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:** ESTEBAN FERRER

OWNER

10/11/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date