

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000154944

Entity Name: CAMPERS INSURANCE LLC

Current Principal Place of Business:

4770 BISCAYNE BLVD
STE 720
MIAMI, FL 33137

Current Mailing Address:

4770 BISCAYNE BLVD
STE 720
MIAMI, FL 33137 US

FEI Number: 46-4033052

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARNOLD, KEN
4770 BISCAYNE BLVD
STE 720
MIAMI, FL 33137 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: KEN ARNOLD

01/06/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name ARNOLD, CHERYL
Address 4770 BISCAYNE BLVD
STE 720
City-State-Zip: MIAMI FL 33137

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: CHERYL ARNOLD

MGR

01/06/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date