2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2020
Secretary of State
4141610384CC

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Entity Name: MJC INSURANCE SERVICES LLC

Current Principal Place of Business:

10033 SAWGRASS DR W
SUITE 104
PONTE VEDRA, FL 32082

Current Mailing Address:

10033 SAWGRASS DR W
SUITE 104
PONTE VEDRA, FL 32082 US

FEI Number: 46-4045849

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASPER, JANE
96062 MARSH LAKES DR
FERNANDINA BEACH, FL 32034 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	RADCLIFFE, MAUREEN
Address	10033 SAWGRASS DR W SUITE 104
City-State-Zip:	PONTE VEDRA FL 32082

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: MAUREEN RADCLIFFE MANAGER 01/23/2020

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