

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000066256

Entity Name: VILLOCH INSURANCE GROUP, LLC

Current Principal Place of Business:

221 S LEJEUNE ROAD
2ND FLOOR
CORAL GABLES, FL 33134

Current Mailing Address:

221 S LEJEUNE ROAD
2ND FLOOR
CORAL GABLES, FL 33134 US

FEI Number: 46-5533612

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VILLOCH, GERALDINE E
221 S LEJEUNE ROAD
CORAL GABLES, FL 33134 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 VILLOCH, GERALDINE
Address 1300 PONCE DE LEON BLVD., #504
City-State-Zip: CORAL GABLES FL 33134

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: GERALDINE VILLOCH

OWNER

03/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date