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.

PRESIDENT

SIGNATURE: CHRIS BAXTER

Electronic Signature of Signing Authorized Person(s) Detail

2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L14000073233

Entity Name: AMPRO RISK PURCHASE GROUP LLC

#### **Current Principal Place of Business:**

C/O BAXTER AND ASSOCIATES 1 SOUTH A ST STE 102 PENSACOLA, FL 32502

### **Current Mailing Address:**

C/O BAXTER AND ASSOCIATES 1 SOUTH A ST STE 102 PENSACOLA, FL 32502 US

## FEI Number: 37-1829803

## Name and Address of Current Registered Agent:

MADIO, RUSS 10346 SW 22 PLACE DAVIE, FL 33324 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	RUSS MADIO, SECRETARY			06/21/2016
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	PRESIDENT	Title	SECRETARY	
Name	BAXTER, CHRIS	Name	MADIO, RUSS	
Address	1 SOUTH A ST STE 102	Address	10346 SW 22 PLACE	
City-State-Zip:	PENSACOLA FL 32502	City-State-Zip:	DAVIE FL 33324	

# FILED Jun 21, 2016 Secretary of State CC1582664364

Certificate of Status Desired: No

06/21/2016 Date