

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000081752

Entity Name: IRISH INSURANCE GROUP, LLC

Current Principal Place of Business:

36408 US HWY 19 N
PALM HARBOR, FL 34684

Current Mailing Address:

36408 US HWY 19 N
PALM HARBOR, FL 34684

FEI Number: 46-5709659

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BRANNIGAN, KENNETH
36408 US HWY 19 N
PALM HARBOR, FL 34684 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 BRANNIGAN, KEN
Address 36408 US HWY 19 N
City-State-Zip: PALM HARBOR FL 34684

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: KEN BRANNIGAN

MGR

03/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date