

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000099425

Entity Name: NTS INSURANCE SERVICES, LLC

Current Principal Place of Business:

1750 W BROADWAY ST
#111
OVIDO, FL 32765

Current Mailing Address:

537 TETON ST
LAKE MARY, FL 32746 US

FEI Number: 47-1170023

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHOOPMAN, NICOLAS T
1877 S FEDERAL HIGHWAY
#200
BOCA RATON, FL 33432 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: NICOLAS T SHOOPMAN

04/28/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CHAIRMAN
Name SHOOPMAN, NICOLAS T
Address 1750 W BROADWAY ST
#111
City-State-Zip: OVIDO FL 32765

Title AUTHORIZED MEMBER
Name SHOOPMAN, SARAH ANNE
Address 537 TETON ST
City-State-Zip: LAKE MARY FL 32746

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: NICOLAS T SHOOPMAN

CHAIRMAN

04/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date