

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000135567

Entity Name: KAUFFMAN INSURANCE GROUP, LLC

Current Principal Place of Business:

9373 WEST SAMPLE ROAD
SUITE 207
CORAL SPRINGS, FL 33065

Current Mailing Address:

9373 WEST SAMPLE ROAD
SUITE 207
CORAL SPRINGS, FL 33065 US

FEI Number: 47-1714086

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAUFFMAN, SHIRLY
9373 WEST SAMPLE ROAD
SUITE 207
CORAL SPRINGS, FL 33065 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: SHIRLY KAUFFMAN

01/18/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name KAUFFMAN, SHIRLY
Address 9373 WEST SAMPLE ROAD, SUITE
207
City-State-Zip: CORAL SPRINGS FL 33065

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: SHIRLY KAUFFMAN

OWNER

01/18/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date