

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000007305

**Entity Name:** SEGUROS UNDERWRITERS, LLC

**Current Principal Place of Business:**

7900 OAK LANE  
SUITE 470  
MIAMI LAKES, FL 33016

**Current Mailing Address:**

PO BOX 800  
OAK RIDGE, TN 37831 US

**FEI Number:** 47-2809085

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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	AMBR	Title	AMBR
Name	ARWOOD, ROBERT J	Name	ARWOOD, WILLIAM M
Address	800 OAK RIDGE TURNPIKE, A-1000	Address	800 OAK RIDGE TPKE STE A-1000
City-State-Zip:	OAK RIDGE TN 37830	City-State-Zip:	OAK RIDGE TN 37830

*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:** ROBERT J AROWOOD

**MEMBER**

**03/13/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date