#### 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000059619

Entity Name: BRICKELL AVENUE INSURANCE, LLC

# Current Principal Place of Business:

1110 BRICKELL AVENUE 420 MIAMI, FL 33131

# **Current Mailing Address:**

1110 BRICKELL AVENUE 420 MIAMI, FL 33131 US

## FEI Number: APPLIED FOR

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

VALLADARES, SORAIA L 1110 BRICKELL AVENUE 420 MIAMI, FL 33131 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: SORAIA L VALLADARES

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

Title
MGR

Name
VALLADARES, SORAIA L

Address
1110 BRICKELL AVENUE 420

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City-State-Zip: MIAMI FL 33131

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.

MANAGER

## SIGNATURE: SORAIA L VALLADARES

Electronic Signature of Signing Authorized Person(s) Detail

## FILED Jan 19, 2016 Secretary of State CC4667587081

Certificate of Status Desired: No

01/19/2016 Date

01/19/2016 Date