2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2016
Secretary of State
CC6677507318

DOCUMENT# L15000141650

Entity Name: 123 INSURANCE LLC

Current Principal Place of Business:

12555 ORANGE DR
203
DAVIE, FL 33330

Current Mailing Address:

12555 ORANGE DR
203
DAVIE, FL 33330

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DESADA, JOCELYN
12555 ORANGE DR
203
DAVIE, FL 33330 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	DESADA, JOCELYN
Address	12555 ORANGE DR.
City-State-Zip:	DAVIE FL 33330

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: JOCELYN DESADA OWNER 04/29/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date