

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000001696

Entity Name: PYLE INSURANCE LLC

Current Principal Place of Business:

1622 FERRIS AVE
ORLANDO, FL 32803

Current Mailing Address:

1622 FERRIS AVE
ORLANDO, FL 32803 US

FEI Number: 81-0944693

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PYLE, DONOVAN
1622 FERRIS AVE
ORLANDO, FL 32803 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	AR	Title	AR
Name	PYLE, DONOVAN	Name	PYLE, DONOVAN
Address	1622 FERRIS AVE	Address	1622 FERRIS AVE
City-State-Zip:	ORLANDO FL 32803	City-State-Zip:	ORLANDO FL 32803

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: DONOVAN PYLE

CEO

03/17/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date