

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000166747

Entity Name: INSURANCE SERVICES NETWORK, LLC

Current Principal Place of Business:

422 NE 2ND PL
SUITE 200
CAPE CORAL, FL 33909

Current Mailing Address:

422 NE 2ND PL
SUITE 200
CAPE CORAL, FL 33909 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCALZO, RONALD V JR
422 NE 2ND PL
SUITE 200
CAPE CORAL, FL 33909 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 MGMR
Name SCALZO, RONALD V JR
Address 422 NE 2ND PL
 SUITE 200
City-State-Zip: CAPE CORAL FL 33909

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: RONALD V SCALZO

MGR

03/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date