2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2017
Secretary of State
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Entity Name: UNIVERSAL INSURANCE AND REINSURANCE LLC

Current Principal Place of Business:

18495 SOUTH DIXIE HWY
393
MIAMI, FL 33157

Current Mailing Address:

18495 SOUTH DIXIE HWY
393
MIAMI, FL 33157 US

FEI Number: 81-4011100

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ORANTES DE OSEGUEDA, ROSA E
18495 SOUTH DIXIE HWY
393
MIAMI, FL 33157 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
Name	ORANTES DE OSEGUEDA, ROSA E
Address	18495 SOUTH DIXIE HWY 393
City-State-Zip:	MIAMI FL 33157

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: ORANTES DE OSEGUEDA.ROSA E AMBR 05/01/2017

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