

**2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L16000185087

**Entity Name:** J & A INSURANCE SOLUTIONS LLC

**Current Principal Place of Business:**

304 W HIGHLAND DR  
LAKELAND, FL 33803

**Current Mailing Address:**

6474 BRISTOL OAKS DR  
LAKELAND, FL 33811 US

**FEI Number:** 81-4083830

**Certificate of Status Desired:** Yes

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

GARCIA, JACQUELINE  
7609 MATHER RD N  
LAKELAND, FL 33810 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:** JACQUELINE GARCIA

10/28/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRES, AP  
Name            GARCIA, JACQUELINE  
Address        4415 FLORIDA NATIONAL DR SUITE  
                  212  
City-State-Zip: LAKELAND FL 33813

*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:** JACQUELINE GARCIA

PRESIDENT

10/28/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date