

2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L17000104346

Entity Name: 01 ALLEGIANT INSURANCE SOLUTIONS, LLC

Current Principal Place of Business:

1172 SOUTH DIXIE HIGHWAY
SUITE 555
CORAL GABLES, FL 33146

Current Mailing Address:

1172 SOUTH DIXIE HIGHWAY
555
CORAL GABLES, FL 33146 US

FEI Number: 82-1513315

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LYONS, MARIA
1172 SOUTH DIXIE HIGHWAY
SUITE 555
CORAL GABLES, FL 33146 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: MARIA LYONS

03/04/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CEO
Name LYONS, MARIA
Address 1172 SOUTH DIXIE HIGHWAY
SUITE 555
City-State-Zip: CORAL GABLES FL 33146

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: MARIA LYONS

CEO

03/04/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date