

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000161218

Entity Name: LEGAL ASSURANCES FIRM, LLC

Current Principal Place of Business:

2637 E ATLANTIC BLVD
#42281
POMPANO BEACH, FL 33062

Current Mailing Address:

2637 E ATLANTIC BLVD
#42281
POMPANO BEACH, FL 33062 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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 MGR
Name REVOCABLE LIVING TRUST OF
LEGAL ASSURANCES
Address 2637 E ATLANTIC BLVD #42281
City-State-Zip: POMPAN0 BEACH FL 33470

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: KISLEV COLMENARES

LEGAL ASSISTANT

04/09/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date