

2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000002996

Entity Name: STARR INSURANCE AGENCY, LLC

Current Principal Place of Business:

399 PARK AVENUE
9TH FLOOR
NEW YORK, NY 10022

Current Mailing Address:

THREE GREENWICH OFFICE PARK
51 WEAVER STREET
GREENWICH, CT 06831 US

FEI Number: 47-2248811

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	MANAGER	Title	MANAGER
Name	BLAKEY, STEVEN G.	Name	CRUZ, ROBERT
Address	399 PARK AVENUE, 2ND FLOOR	Address	399 PARK AVENUE 9TH FLOOR
City-State-Zip:	NEW YORK NY 10022	City-State-Zip:	NEW YORK NY 10022

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: ROBERT CRUZ

MANAGER

04/07/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date