

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000005460

Entity Name: ASCENT INSURANCE SERVICES, LLC

Current Principal Place of Business:

500 N WATER ST., SUITE 702
CORPUS CHRISTI, TX 78401

Current Mailing Address:

500 N WATER ST., SUITE 702
CORPUS CHRISTI, TX 78401

FEI Number: 90-0843480

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUBCO REGISTERED AGENT SERVICE, INC.
155 OFFICE PLAZA DR. 1ST FL
TALLAHASSEE, FL 32301 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 MOORE, GARY W
Address 500 N WATER ST., SUITE 702
City-State-Zip: CORPUS CHRISTI TX 78401

Title MGR
Name HARLEQUIN HOLDINGS, LLC
Address 4500 FULLER, SUITE 400
City-State-Zip: IRVING TX 75038

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GARY W. MOORE

PRESIDENT

04/09/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date