2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000000944

Entity Name: ORCHID UNDERWRITERS AGENCY HOLDINGS LLC

FILED Apr 11, 2019 **Secretary of State** 4898240522CC

Date

Current Principal Place of Business:

1201 19TH PLACE, SUITE A110 VERO BEACH, FL 32960

Current Mailing Address:

1201 19TH PLACE, SUITE A110 VERO BEACH, FL 32960 US

FEI Number: 47-1871103 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: JAMES H TANKS III 04/11/2019

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title MANAGER Title MANAGER CARLSEN, STEVEN EARLS, ALEX Name Name

Address 1201 19TH PLACE Address 1201 19TH PLACE

SUITE A110 SUITE A110

City-State-Zip: VERO BEACH FL 32960 City-State-Zip: VERO BEACH FL 32960

Title **MANAGER** Title **MANAGER**

Name EMMONS, BRADFORD R. Name GEISLER, JOHN

1201 19TH PLACE 1201 19TH PLACE Address Address SUITE A110

SUITE A110

VERO BEACH FL 32960 City-State-Zip: City-State-Zip: VERO BEACH FL 32960

Title **MANAGER** Title **MANAGER**

Name ORUM, NICK Name PETROCELLI, PHILLIP Address 1201 19TH PLACE Address 1201 19TH PLACE

SUITE A110 SUITE A110

City-State-Zip: VERO BEACH FL 32960 City-State-Zip: VERO BEACH FL 32960

Title MANAGER

SALIPANTE, ROBERT Name 1201 19TH PLACE Address

SUITE A110

VERO BEACH FL 32960 City-State-Zip:

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.

04/11/2019 **MANAGER** SIGNATURE: ALEX EARLS

Electronic Signature of Signing Authorized Person(s) Detail

Date