

**2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L01000016562

Entity Name: F &amp; F INSURANCE, LLC

**FILED**  
**Sep 12, 2006**  
**Secretary of State****Current Principal Place of Business:**5979 N.W. 151 STREET, SUITE 105  
MIAMI LAKES, FL 33014**New Principal Place of Business:****Current Mailing Address:**5979 N.W. 151 STREET, SUITE 105  
MIAMI LAKES, FL 33014**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**FOWLER, LEE R  
5979 N.W. 151 STREET, SUITE 105  
MIAMI LAKES, FL 33014 US**Name and Address of New Registered Agent:**DOWLING, LYNN  
5979 N.W. 151 STREET, SUITE 105  
MIAMI LAKES, FL 33014 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: LYNN DOWLING

09/12/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**Title: MGRM ( ) Delete  
Name: FOWLER, LEE R  
Address: 5979 NW 151 STREET #105  
City-St-Zip: MIAMI LAKES, FL 33014Title: MGRM ( ) Delete  
Name: FRENCH, RICHARD D  
Address: 5979 NW 151 STREET #105  
City-St-Zip: MIAMI LAKES, FL 33014Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: MGR ( ) Change (X) Addition  
Name: DOWLING, LYNN  
Address: 5979 NW 151 STREET #105  
City-St-Zip: MIAMI LAKES, FL 33014

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: LYNN DOWLING

MGR

09/12/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date