

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000001459

Entity Name: IRA INSURANCE, LLC

FILED  
Apr 19, 2011  
Secretary of State

**Current Principal Place of Business:**

360 AVENUE STE. 206  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

6741 SW 159 PLACE  
MIAMI, FL 33193

**Current Mailing Address:**

360 AVENUE STE. 206  
CORAL GABLES, FL 33146

**New Mailing Address:**

6741 SW 159 PLACE  
MIAMI, FL 33193

FEI Number: 45-0496559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALVAREZ, IRAIDA RODRIGU  
360 AVENUE STE. 206  
CORAL GABLES, FL 33146 US

**Name and Address of New Registered Agent:**

ALVAREZ, IRAIDA RODRIGU  
6741 SW 159 PLACE  
MIAMI, FL 33193 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: IRAIDA RODRIGUEZ ALVAREZ

04/19/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ALVAREZ, IRAIDA R  
Address: 6741 SW 159 PLACE  
City-St-Zip: MIAMI, FL 33193

I hereby 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: IRAIDA R ALVAREZ

PRES

04/19/2011

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