

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000070195

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** INSURANCE & CONSULTING ENGINEERING CO., LLC

**Current Principal Place of Business:**

3403 NW 82 AVENUE  
SUITE 300  
DORAL, FL 33122

**New Principal Place of Business:**

**Current Mailing Address:**

3403 NW 82 AVENUE  
SUITE 300  
DORAL, FL 33122

**New Mailing Address:**

**FEI Number:** 20-1804996

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ATRIUM REGISTERED AGENTS, INC.  
1500 SAN REMO AVENUE, SUITE 125  
CORAL GABLES, FL 33146 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SATEC LLC  
Address: 3403 NW 82 AVENUE SUITE 300  
City-St-Zip: DORAL, FL 33122

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: SATEC,LLC

MGR

04/26/2012

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