

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000038833

FILED
Jan 07, 2012
Secretary of State

Entity Name: COMPASS INSURANCE AGENCY, LLC

Current Principal Place of Business:

2951 N.W. 21ST TERRACE
MIAMI, FL 331427019 29

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 830604
MIAMI, FL 33283 US

New Mailing Address:

FEI Number: 20-8824088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPO, LISBET ESQ.
10041 BIRD ROAD
MIAMI, FL 33165 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: MGRM
Name: HERNANDEZ, LETICIA
Address: P.O. BOX 830604
City-St-Zip: MIAMI, FL 33283 06

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: LETICIA HERNADEZ

OWNE

01/07/2012

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