2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000095888

Entity Name: JENIDA INSURANCE AGENCY, LLC

FILED Feb 07, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16684 ORANGE AVE EXT. BLDG. #1

FORT PIERCE, FL 34945 US

Current Mailing Address: New Mailing Address:

16684 ORANGE AVE 4609 HUNTING TRAIL

EXT. BLDG. #1 LAKE WORTH, FL 33467 US FORT PIERCE, FL 34945 US

FEI Number: 26-1147601 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CORPORATION SERVICE COMPANY

MCDEAVITT, JENNIFER L

1201 HAYS STREET

4609 HUNTING TRAIL

TALLAHASSEE, FL US LAKE WORTH, FL 33467 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: JENNIFER L. MCDEAVITT 02/07/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 BICHT, AMBER
 Name:

 Address:
 16684 ORANGE AVE. EXT. BLDG. #1
 Address:

 City-St-Zip:
 FORT PIERCE, FL 34945 US
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: MCDEAVITT, J.L. Name: MCDEAVITT, JENNIFER L

Address: 4609 HUNTING TRAIL

City-St-Zip: LAKE WORTH, FL 33467 US

Address: 4609 HUNTING TRAIL

City-St-Zip: LAKE WORTH, FL 33467 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: I.K., LI Name: LI, IDA K

 Address:
 9531 SPANISH MOSS RD. W.
 Address:
 9531 SPANISH MOSS RD. W.

 City-St-Zip:
 LAKE WORTH, FL 33467 US
 City-St-Zip:
 LAKE WORTH, FL 33467 US

Title: () Delete Title: MGRM () Change (X) Addition

Name: Name: BATES, AUSTIN O

Address: Address: 1240

City-St-Zip: City-St-Zip: LOXAHATCHEE, FL 33470

I hereby certify that the information supplied with this filing does not qualify 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: JENNIFER L. MCDEAVITT MGRM 02/07/2008