2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000120150

Entity Name: ALL FLORIDA INSURANCE PARTNERS LLC

FILED Nov 12, 2008 Secretary of State

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

201 E. KENNEDY BLVD. 4836 W SAN JOSE ST

1680 SUITE 1

TAMPA, FL 33602 TAMPA, FL 33629

Current Mailing Address: New Mailing Address:

201 E. KENNEDY BLVD. 4836 W SAN JOSE ST

1680 SUITE 1

TAMPA, FL 33602 TAMPA, FL 33629

FEI Number: 13-4367516 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

GARRIDO, ANTHONY J
201 E. KENNEDY BLVD.
4836 W SAN JOSE ST.
SUITE 1

TAMPA, FL 33602 US TAMPA, FL 33629 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: ANTHONY J GARRIDO 11/12/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 GARRIDO, ANTHONY J
 Name:
 GARRIDO, ANTHONY J

 Address:
 201 E. KENNEDY BLVD. STE 1680
 Address:
 4836 W SAN JOSE ST

Address: 201 E. RENNEDY BLVD. STE 1680 Address: 4836 VV SAN JOSE ST City-St-Zip: TAMPA, FL 33602 US City-St-Zip: TAMPA, FL 33629 US

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: ANTHONY J GARRIDO PRES 11/12/2008