

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L08000010198

FILED
Oct 30, 2009
Secretary of State

Entity Name: COASTAL INSURANCE SERVICES, LLC

Current Principal Place of Business:

5007 TAMIAMI TRAIL E
NAPLES, FL 34113

New Principal Place of Business:

Current Mailing Address:

5007 TAMIAMI TRAIL E
NAPLES, FL 34113

New Mailing Address:

FEI Number: 77-0711472 **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:

HUBSMITH, LEON L
5007 TAMIAMI TRAIL E
NAPLES, FL 34113 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: L LEON HUBSMITH

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: FERNANDEZ, FRANCISCO E
Address: 5007 TAMIAMI TRAIL E
City-St-Zip: NAPLES, FL 34113

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: FRANCISCO E FERNANDEZ

MR

10/30/2009

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