

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000013529

FILED
Feb 16, 2011
Secretary of State

Entity Name: ARBOL LIFE INSURANCE, LLC.

Current Principal Place of Business:

100 SW 117 TERRACE
101
PEMBROKE PINES, FL 33025

New Principal Place of Business:

Current Mailing Address:

100 SW 117 TERRACE
101
PEMBROKE PINES, FL 33025

New Mailing Address:

FEI Number: 26-1922656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARBELAEZ, JAVIER
100 SW 117 TERRACE
101
PEMBROKE PINES, FL 33025 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: ARBELAEZ, JAVIER
Address: 100 SW 117 TERRACE # 101
City-St-Zip: PEMBROKE PINES, FL 33025

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: J _____

P

02/16/2011

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