2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 08, 2011
Secretary of State

DOCUMENT# L09000079181

Entity Name: BLU INSURANCE GROUP LLC

Current Principal Place of Business:

13538 VILLAGE PARK DR., STE 215
ORLANDO, FL 32837

New Principal Place of Business:

11073 COUNTRYWAY BLVD
TAMPA, FL 33626

Current Mailing Address:

13538 VILLAGE PARK DR., STE 215
ORLANDO, FL 32837

New Mailing Address:

11073 COUNTRYWAY BLVD
TAMPA, FL 33626

FEI Number: 27-0747856 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JAIMIN, PATEL
1752 OAK POND
OLDSMAR, FL 34677 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: JAIMIN, PATEL P
Address: 1752 OAK POND
City-St-Zip: OLDSMAR, FL 34677

Title: MGRM
Name: DEEPAK, JAKHOTIA
Address: 4097 BAYSHORE BLVD
City-St-Zip: TAMPA, FL 33611

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 Statues.

SIGNATURE: JAIMIN PATEL MGRM 09/08/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date