

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000016356

FILED
Oct 03, 2012
Secretary of State

Entity Name: FLORIDA PROGRAM INSURANCE PLLC

Current Principal Place of Business:

2776 SHAUGHNESSY DRIVE
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

2776 SHAUGHNESSY DRIVE
WELLINGTON, FL 33414 US

New Mailing Address:

FEI Number: 27-1902948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOUISA EVERETTT
2776 SHAUGHNESSY DRIVE
WELLINGTON, FL 33414 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: LOUISA EVERETT

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: EVERETT, LOUISA
Address: 2776 SHAUGHNESSY DR
City-St-Zip: WELLINGTON, FL 33414 US

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: LOUISA EVERETT

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10/03/2012

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