

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000029350

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** THE INSURANCE FACTORY, LLC

**Current Principal Place of Business:**

7231 BISCAYNE BLVD.  
MIAMI, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

7231 BISCAYNE BLVD.  
MIAMI, FL 33138

**New Mailing Address:**

**FEI Number:** 27-2118523

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ABARCA, CYNTHIA V MGR  
6815 BISCAYNE BLVD., STE. 103-201  
MIAMI, FL 33138 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:** MGR  
**Name:** CHUMBI HOLDINGS, LLC  
**Address:** 6815 BISCAYNE BLVD., STE. 103-201  
**City-St-Zip:** MIAMI, FL 33138

**Title:** MGR  
**Name:** ABARCA, CYNTHIA V MGR  
**Address:** 8101 BISCAYNE BLVD., S-615  
**City-St-Zip:** MIAMI, FL 33138

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:** CYNTHIA V ABARCA

MGR

05/01/2012

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