

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000064523

FILED
Apr 20, 2011
Secretary of State

Entity Name: ALLQUOTE INSURANCE, LLC

Current Principal Place of Business:

2236 CAPITAL CIRCLE N.E.
UNIT 104
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

2236 CAPITAL CIRCLE N.E.
UNIT 104
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 27-2863394

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCONNELL, JOHN D
2236 CAPITAL CIRCLE N.E.
UNIT 104
TALLAHASSEE, FL, FL 32308 US

Name and Address of New Registered Agent:

MCCONNELL, JOHN D
2236 CAPITAL CIRCLE N.E.
UNIT 104
TALLAHASSEE, FL 32308 US

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

04/20/2011

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MCCONNELL, JOHN D
Address: 2236 CAPITAL CIRCLE N.E., UNIT 104
City-St-Zip: TALLAHASSEE, FL 32312

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: JOHN D MCCONNELL

MGRM

04/20/2011

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