

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000074950

Entity Name: TRIPLE L INSURANCE AGENCY, LLC

FILED
Jan 04, 2012
Secretary of State

Current Principal Place of Business:

4285 SW MARTIN HIGHWAY
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

2801 SE WILTSHIRE TERRACE
PORT SAINT LUCIE, FL 34952 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, LARRY D JR.
2801 SE WILTSHIRE TERRACE
PORT SAINT LUCIE, FL 34952 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: WILLIAMS, LARRY D JR.
Address: 2801 SE WILTSHIRE TERRACE
City-St-Zip: PORT SAINT LUCIE, FL 34952

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: LARRY D WILLIAMS JR.

MGR

01/04/2012

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