NAME STREET ADDRESS CITY-ST-ZIP  CAMPANO, JERUE K 1000 WESTWIND WAY BARTOW FL 33830  CITY-ST-ZIP  MGRM STREET ADDRESS CITY-ST-ZIP  MGRM STREET ADDRESS CITY-ST-ZIP  TITLE  MGRM STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  CHange Addition NAME STREET ADDRESS CITY-ST-ZIP  CHANGE STREET ADDRESS CITY-S	2001 UNIFORM	BUSIŅESS REPOR	01 APR -9 AM 7:50			
GATEWAY INSURANCE AGENCY, L.C.  Principal Place of Business  Making Address  May Address  ASO WEST ONALIND PARK BOULEVARD FT. LAUDERDALE Ft. 33311  ASO WEST ONALIND PARK BOULEVARD FT. LAUDER				SECRETARY OF STATE :		
240 WEST OMLAND PARK SOULEVARD FT. LAUDERDALE Ft. 32511  2. Principal Place of Business  3. Mailing Address  Sulfe, Apr. #, etc.  City & State	GATEWAY INSURANCE AGENCY, L.C.			MELMINOSELLI	•	
200 WEST OMLAND PARK SOULEVARD FT. LIUDERDALE Ft. 32511  2. Principal Place of Business  3. Mailing Address  Sulfe, Apr. #, etc.  City & State						
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Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite   Suite, Apt. #, etc.   DO NOT WRITE IN THIS SPACE			BOULEVARD		****	
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   DO NOT WRITE IN THIS SPACE	<u> </u>					
City & State  City & State  City & State  City & State  Country  C	2. Principal Place of Business 3. Mailing Address					
Street Address of Courtery   Zp	Suite, Apt. #, etc. Suite, Apt. #, etc.		· · · · · · · · · · · · · · · · · · ·	DO NOT WRITE IN THIS SPACE		
S. Name and Address of Current Registered Agent    Name   David D S 2011	City & State City & State			CE_004E020		
MANN, JOHN L 105 SQUITH FLORIDA AVENUE LAKELAND FL 33801  Street Address (PO. Box Number is Not Acceptable)  243 W. Oalcland PK B V C  City FL Lauder Clark FL  20,03831  8. The above named early submit this share of the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  FILE NOW!!! FEE IS \$50.00  Make Check Payable to Department of State  9. MANAGING MEMBERS/MEMBERS  10. ADDITIONS/CHANGES  6. MANAGING MEMBERS/MEMBERS  10. ADDITIONS/CHANGES  9. MANAGING MEMBERS/MEMBERS/MEMBERS  10. ADDITIONS/CHANGES  9. MANAGING MEMBERS/MEMBERS	Zip Country	Zip C	Country	5. Certificate of Status Desired See Requirements	Additional ired	
MANN, JOHN L  105 SOUTH FLORIDA AVENUE  LAKELAND FL 33801  8. The above named early subhis this system of the purpose of changing its registered diffice or registered agent, or both, in the State of Florida.  SIGNATURE  Signature, year to primat raiser registles upon and to f applicable.  POTE Registered Agent agent are invalidately and the purpose of changing its registered diffice or registered agent, or both, in the State of Florida.  SIGNATURE  Signature, year to primat raiser registles upon and to f applicable.  POTE Registered Agent agent agent are invalidately and agent agent agent are invalidately and agent agent agent agent agent are invalidately and agent agen	Name and Address of Current Registered Agent		Nama *=			
105 SOUTH FLORIDA AVENUE LAKELAND FL 33801  2430 W. O O ALCON CP K B V C  Olty FL LOW LEVIC OF FL  270,003 3 1 1  28. The above named entire subtraction in the purpose of changing its registered office or registered agent, or both. In the State of Florida.  SIGNATURE  Sprature, Typed in printed named registers agent and lite if applicable.  PICTE Registered Agent registered agent, or both. In the State of Florida.  FILE NOW!!! FEE IS \$50.00  Make Check Payable to Department of State  9. MANAGING MEMBERS / MEMBERS  10. ADDITIONS/CHANGES  TITLE  MARK  CAMPANO, JERUE K  1000 WESTWIND WAY  CONTY-ST-2P  MARGING  CAMPANO, JERUE K  1000 WESTWIND WAY  STREET ADDRESS  ONLY-ST-2P  FL JAUDEDDALE FL 33311  Delete  1111.2  Delete  1111.2	MANN JOHN I		- David-D-Stanton-			
8. The above named orfly submits in shear of the purpose of changing its registered define or registered agent, or both, in the State of Florida.  SIGNATURE  Signature, typest or pretent nerver registere squere and little is spokeable. ProTE Registered Agent signature required who remaining.  FILE NOW!!! FEE IS \$50.00  Make Check Payable to Department of State  9. MANAGING MEMBERS 10. ADDITIONS/CHANGES  TITLE  MARE  CAMPANO, JERUE K  1000 WESTWIND WAY  STREET ADDRESS  CITY-ST-2P  TITLE  MARE  MARE  MARE  MARE  SIRET ADDRESS  CITY-ST-2P  TITLE  MARE  SIRET ADDRESS  CITY-ST-2P  Addition  Addition  MARE  SIRET ADDRESS  CITY-ST-2P  CITY-S	·					
8. The above named entity submits his sherright to the purpose of changing its registered agent, or both, in the State of Florida.  SIGNATURE	LAKELAND FL 33801		2430 W. Oaldand PK Blvd			
SIGNATURE    Signature   Signa		$\wedge$ 1	City F-	city F+ Lauderdale FL zipsog311		
Signature, typed or printed name of regarders spent and title of exponences. Agent signature required supern infinitiating)   DAT	8. 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.					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State  9.						
9. MANAGING MEMBERS   10. ADDITIONS/CHANGES   11TLE						
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 rustee employment to execute this report as required by Chapter 608. Florida Statutes.	CITY-ST-ZIP		CITY-ST-ZIP			
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