

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000003500

FILED
Apr 14, 2011
Secretary of State

Entity Name: INSURANCE SPECIALTY GROUP, LLC

Current Principal Place of Business:

4501 CIRCLE 75 PARKWAY, SUITE F-6200
ATLANTA, GA 30339

New Principal Place of Business:

4501 CIRCLE 75 PARKWAY
SUITE F-6200
ATLANTA, GA 30339

Current Mailing Address:

4501 CIRCLE 75 PARKWAY, SUITE F-6200
ATLANTA, GA 30339

New Mailing Address:

4501 CIRCLE 75 PARKWAY
SUITE F-6200
ATLANTA, GA 30339

FEI Number: 56-2357677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PRES
Name: HARRELL, BRUCE
Address: 4501 CIRCLE 75 PARKWAY SUITE F-6200
City-St-Zip: ATLANTA, GA 30339 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: BRUCE HARRELL

PRES

04/14/2011

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