

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000003345

FILED
Apr 25, 2012
Secretary of State

Entity Name: AMERICAN AUTO ASSURANCE, LLC

Current Principal Place of Business:

25 CROSSROADS DRIVE, ST 404
OWINGS MILLS, MD 21117

New Principal Place of Business:

25 CROSSROADS DRIVE
ST 404
OWINGS MILLS, MD 21117

Current Mailing Address:

25 CROSSROADS DRIVE, ST 404
OWINGS MILLS, MD 21117

New Mailing Address:

25 CROSSROADS DRIVE
ST 404
OWINGS MILLS, MD 21117

FEI Number: 27-2559953

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: MGRM
Name: SEGAL, MICHAEL C
Address: 25 CROSSROADS DRIVE, ST 404
City-St-Zip: OWINGS MILLS, MD 21117

Title: MGRM
Name: MILLSTEIN, STEPHEN B
Address: 25 CROSSROADS DRIVE, ST 404
City-St-Zip: OWINGS MILLS, MD 21117

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: KRISTA CUSTER

AP

04/25/2012

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