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C. LEWIS JUN 2 4 2011 **EXAMINER**

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: ASSURANCE United broup, LLC. Name of Foreign Limited Liability Company		
Dear Sir or Madam:		
The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Victor De Payla		
ASSURANCE UNITED VIOUP, LLC Firm/Company		
1451 W LYPRESS UPEK road STE 375 Address		
Ft. Lauderdale, FL 3309 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Daniel Merandi : at (954) 2341983		
Name of Person Area Code and Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount: \$25 Filing Fee Certificate of Status Certified Copy \$60 Filing Fee, Certificate of Status & Certified Copy Certified Copy		

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AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY 2011 JUN 23 AM 15: 107

SECRETARY STATE
FACE AHASSEEDEL ORIDA

1. The name of the limited liability compan Department of State is: ASSUTANCE	y as it appears on the records of the Florida UNITED DIOUP, LLC.	
2. This entity was formed under the laws of: Delawre .		
3. This entity was authorized to transact business in Florida on		
4. The name and address of each manager or managing member is as follows:		
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MOR	Camila N. Felsky 1451 W Cypress Creekel Ste. 35 Ft Landerdale, FL. 33309	
	·	
· 		
Required Signature Signature of Manager,	Managing Member or Member	

Filing Fee: \$25