

M11000002101

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

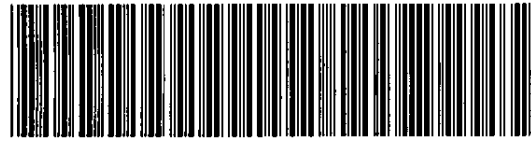
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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T. CLINE  
OCT 12 2011  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Assurance United Group, 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:

Daniel Merandi  
Name of Person

Firm/Company

1800 SW 1st AVE STE 405  
Address

Miami, FL 33129  
City/State and Zip Code

djm\_fin@yahoo.com  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Daniel Merandi at ( 877 ) 815-7550  
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
- \$30 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

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**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY  
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: ASSURANCE UNITED GROUP, LLC

2. This entity was formed under the laws of: \_\_\_\_\_

3. This entity was authorized to transact business in Florida on 04/25/2011  
and its Florida document/registration number is M11000002101

4. The name and address of each manager or managing member is as follows:

Title:  
"MGR" = Manager  
"MGRM" = Managing Member

Name and Address:

MGRM

Victor De Paula  
1451 W CYPRESS CREEK ROAD #375  
FT LAUDERDALE FL 33309

MGRM

Daniel Merandi  
1451 W CYPRESS CREEK ROAD #375  
FT LAUDERDALE FL 33309

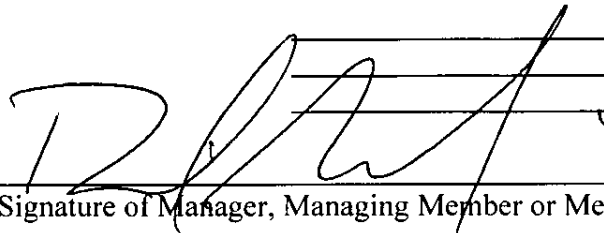
MGR

Camila N. Felsky  
1451 W CYPRESS CREEK ROAD #375  
FT LAUDERDALE FL 33309

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TALLAHASSEE FLORIDA

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Required Signature: \_\_\_\_\_

  
Signature of Manager, Managing Member or Member

Filing Fee: \$25