

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000029890

Entity Name: INSURANCE HOME OFFICE SERVICES, L.L.C.

Current Principal Place of Business:

700 JOHN RINGLING BOULEVARD
E308
SARASOTA, FL 34236

Current Mailing Address:

P.O. BOX 460
SARASOTA, FL 34230

FEI Number: 74-3102260

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORAN, JOHN AESQ
C/O DUNLAP & MORAN, P.A.
22 SOUTH LINKS AVE., STE. 300
SARASOTA, FL 34236 US

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

Authorized Person(s) Detail :

Title MGR
Name NEFF, RAY
Address 700 JOHN RINGLING BOULEVARD
E308
City-State-Zip: SARASOTA FL 34236

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RAYMOND M. NEFF

MGR.

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date