

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000088970

**Entity Name:** XFINITY INSURANCE, LLC

**Current Principal Place of Business:**

5246 SW 8TH ST  
STE 102A  
CORAL GABLES, FL 33134

**Current Mailing Address:**

5246 SW 8TH ST  
STE 102A  
CORAL GABLES, FL 33134 US

**FEI Number:** 14-1978757

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MEDINA , ERIKA JULIETH  
5246 SW 8TH ST  
STE 102A  
CORAL GABLES, FL 33134 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:** JOHN J MEDINA

01/16/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MEDINA , JOHN J  
Address 5246 SW 8TH ST  
STE 102A  
City-State-Zip: CORAL GABLES FL 33134

Title MGRM  
Name MEDINA , JOHN J  
Address 5246 SW 8TH ST  
STE 102A  
City-State-Zip: CORAL GABLES FL 33134

Title MANAGING MEMBER  
Name MEDINA, ERIKA JULIETH  
Address 5246 SW 8TH ST  
STE 102A  
City-State-Zip: CORAL GABLES FL 33134

*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:** ERIKA JULIETH MEDINA

**REGISTERED AGENT**

01/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date