2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2014
Secretary of State
CC0836866312

DOCUMENT# L08000001755

Entity Name: JOACHIM INSURANCE GROUP, LLC

Current Principal Place of Business:

9251 S. ORANGE BLOSSOM TRAIL
SUITE 3
ORLANDO, FL 32837

Current Mailing Address:

9251 S. ORANGE BLOSSOM TRAIL
SUITE 3
ORLANDO, FL 32837

FEI Number: 42-1751289

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOACHIM, LAWENS
9251 S. ORANGE BLOSSOM TRAIL
3
ORLANDO, FL 32837 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	Title	MGRM
Name	JOACHIM, LAWENS	Name	JOACHIM, ARRY
Address	9251 S. ORANGE BLOSSOM TRAIL STE 3	Address	9251 S. ORANGE BLOSSOM TRAIL STE 3
City-State-Zip:	ORLANDO FL 32837	City-State-Zip:	ORLANDO FL 32837

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: LAWENS JOACHIM MGR 04/22/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date