2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000007939

Entity Name: BOSTON MARKS INSURANCE, LLC

Current Principal Place of Business:

355 ALHAMBRA CIRCLE STE 1201

CORAL GABLES, FL 33134

Current Mailing Address:

355 ALHAMBRA CIRCLE

STE 1201

CORAL GABLES, FL 33134 US

FEI Number: 26-4137476 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NEWSON-LYONS, ANNA 355 ALHAMBRA CIRCLE STE 1201

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: ANNA NEWSON-LYONS 01/15/2020

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

TitleMR.TitleMANAGERNameIRAGORRI, REINALDONameDUFF, IAN

Address 355 ALHAMBRA CIRCLE Address 355 ALHAMBRA CIRCLE

STE 1201 STE 1201

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MGR

Name STAFFORD, PHIL

Address 355 ALHAMBRA CIRCLE

STE 1201

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.

MR

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 15, 2020

Secretary of State

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