## 2013 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: No

Name and Address of Current Registered Agent:

ENRIQUEZ, JERRY 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:

Electronic Signature of Registered Agent

Date

**FILED** Jan 25, 2013

**Secretary of State** 

CC1506712058

Authorized Person(s) Detail:

Title Title MR.

Name MASON, ALFREDO Name IRAGORRI, REINALDO 355 ALHAMBRA CIRCLE Address

355 ALHAMBRA CIRCLE Address STE 1201 STE 1201

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

Title **MGRM** 

Name MASON, ILIANA

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.