2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2018
Secretary of State
CC2840640709

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 04/19/2018

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MR.	Title	MANAGER
Name	IRAGORRI, REINALDO	Name	DUFF, IAN
Address	355 ALHAMBRA CIRCLE STE 1201	Address	355 ALHAMBRA CIRCLE 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.

SIGNATURE: PHIL STAFFORD MR 04/19/2018

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