

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000075351

Entity Name: SKY BLUE INSURANCE GROUP LLC

Current Principal Place of Business:

3905 NW 107TH AVE
DORAL PARK CENTRE SUITE 412
DORAL, FL 33178

Current Mailing Address:

3905 NW 107TH AVE
DORAL PARK CENTRE SUITE 412
DORAL, FL 33178 US

FEI Number: 27-3055528

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOLINA, PAUL A
2466 SW 137 AVE
MIAMI, FL 33175 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	MGR
Name	MOLINA, PAUL A	Name	CONDE, JOSE
Address	3905 NW 107 AVE DORAL PARK CENTRE 412	Address	3905 NW 107 AVE DORAL PARK CENTRE
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178

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: JOSE CONDE

MGR

01/19/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date