

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000088282

Entity Name: TRADEWINDS INSURANCE CONSULTANTS LLC

Current Principal Place of Business:

2001 PALM BEACH LAKES BLVD
SUITE 300L
WEST PALM BEACH, FL 33409

Current Mailing Address:

2001 PALM BEACH LAKES BLVD
SUITE 300L
WEST PALM BEACH, FL 33409 US

FEI Number: 27-3301991

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAMJATTANSINGH, VICTOR W
2001 PALM BEACH LAKES BLVD.
SUITE 300L
WEST PALM BEACH, FL 33409 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 MGRM
Name RAMJATTANSINGH, VICTOR W
Address 2001 PALM BEACH LAKES BLVD.
SUITE 300 L
City-State-Zip: WEST PALM BEACH FL 33409

Title AUTHORIZED MEMBER
Name RAMJATTANSINGH, SHABBENA
Address 423 PUMPKIN DRIVE
City-State-Zip: PALM BEACH GARDENS FL 33410

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: VICTOR W RAMJATTANSINGH

OWNER

02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date