

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000091924

Entity Name: AEVO INSURANCE SERVICES, LLC

Current Principal Place of Business:

101 EDGEWATER DRIVE
SUITE 260
WAKEFIELD, MA 01880

Current Mailing Address:

220 S. RIDGEWOOD AVE.
DAYTONA BEACH, FL 32114 US

FEI Number: 27-3371606

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MANAGER
Name BROWN, P. BARRETT
Address SIX CONCOURSE PARKWAY
 SUITE 2300
City-State-Zip: ATLANTA GA 30328

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: P. BARRETT BROWN

MANAGER

03/19/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date