2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2014
Secretary of State
CC5962993207

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Entity Name: INSURE-VAL, LLC

Current Principal Place of Business:

623 ANHINGA RD
WINTER SPRINGS, FL 32708

Current Mailing Address:

2178 ARBOUR WALK CIRCLE
#2322
NAPLES, FL 34109 US

FEI Number: 27-3815815

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPROUSE, MICHAEL
2178 ARBOUR WALK CIRCLE
#2322
NAPLES, FL 34109 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	SPROUSE, MICHAEL
Address	2178 ARBOUR WALK CIRCLE #2322
City-State-Zip:	NAPLES FL 34109

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: MICHAEL SPROUSE MGRM 04/25/2014

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