

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000111018

Entity Name: MD INSURANCE GROUP LLC

Current Principal Place of Business:

1197 GENEVA DR
OVIEDO, FL 32765

Current Mailing Address:

1197 GENEVA DR
OVIEDO, FL 32765 US

FEI Number: 32-0321537

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MONTEAGUDO, MICHAEL L
1197 GENEVA DR
OVIEDO, FL 32765 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	Title	MGRM
Name	MONTEAGUDO, MICHAEL L	Name	CESTERO, KATHLEEN N
Address	1197 GENEVA DR	Address	1197 GENEVA DR
City-State-Zip:	OVIEDO FL 32765	City-State-Zip:	OVIEDO FL 32765

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL LUIS MONTEAGUDO

MGRM

04/30/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date