2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2013
Secretary of State
CC2405794202

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Entity Name: ASSURED INSURANCE SERVICES, LLC

Current Principal Place of Business:

2440 SE FEDERAL HWY
SUITE 111
STUART, FL 34994

Current Mailing Address:

PO BOX 3344
STUART, FL 34995

FEI Number: 90-0635747

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SELLICK, BRADLEY SR.
2440 SE FEDERAL HWY
SUITE 111
STUART, FL 34994 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	SELLICK, BRADLEY SR.
Address	2440 SE FEDERAL HWY, # 111
City-State-Zip:	STUART FL 34994

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: BRADLEY SELLICK SR MGMR 04/29/2013

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