

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000027421

Entity Name: ORLANDO INSURANCE SERVICES LLC

Current Principal Place of Business:

12360 66TH ST N
SUITE C5
LARGO, FL 33773

Current Mailing Address:

12360 66TH ST N
SUITE C5
LARGO, FL 33773 US

FEI Number: 46-4838174

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VILA, JOSE
12360 66TH ST N
SUITE C5
LARGO, FL 33773 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 MGR
Name VILA, JOSE E
Address 12360 66TH ST N
SUITE C5
City-State-Zip: LARGO FL 33773

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: JOSE E VILA

MGR

04/20/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date