2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 26, 2016
Secretary of State
CC1149089756

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Entity Name: MY INSURANCE PROFESSOR, LLC

Current Principal Place of Business:

1528 CANTORIA AVENUE
CORAL GABLES, FL 33146

Current Mailing Address:

1528 CANTORIA AVENUE
CORAL GABLES, FL 33146 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIAZ-PADRON, JUAN C
1528 CANTORIA AVE.
CORAL GABLES, FL 33146 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	AMBR
Name	DIAZ-PADRON, JUAN CARLOS
Address	1528 CANTORIA AVENUE
City-State-Zip:	CORAL GABLES FL 33146

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: DIAZ-PADRON , JUAN CARLOS MEMBER 02/26/2016

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