

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000136098

Entity Name: WS INSURANCE GROUP, LLC

Current Principal Place of Business:

7501 WILES ROAD
SUITE 107-B
CORAL SPRINGS, FL 33067

Current Mailing Address:

7501 WILES ROAD
SUITE 107-B
CORAL SPRINGS, FL 33067 US

FEI Number: 47-4778970

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAM, SANDRA
7501 WILES ROAD
SUITE 107-B
CORAL SPRINGS, FL 33067 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 SAM, SANDRA
Address 7501 WILES ROAD
SUITE 107-B
City-State-Zip: CORAL SPRINGS FL 33067

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: SANDRA SAM

AMBR

01/03/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date