2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 30, 2019
Secretary of State
8520570319CC

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Entity Name: ASSURANCE TITLE AGENCY LLC

Current Principal Place of Business:

3618 DEL PRADO BLVD S
CAPE CORAL, FL 33904

Current Mailing Address:

3618 DEL PRADO BLVD S
CAPE CORAL, FL 33904 US

FEI Number: 47-5609512

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMPSON, CHENE
PAVESE LAW FIRM
1833 HENDRY ST
FORT MYERS, FL 33901 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: CHENE THOMPSON 01/30/2019

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	LEGAL	Title	MGR
Name	THOMPSON, CHENE	Name	HITCHENS, ANTOINETTE
Address	3618 DEL PRADO BLVD S	Address	3618 DEL PRADO BLVD S
City-State-Zip:	CAPE CORAL FL 33904	City-State-Zip:	CAPE CORAL FL 33904

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: ANTOINETTE HITCHENS MGR 01/30/2019

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