

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000211452

Entity Name: LAWRENCE RISK MANAGEMENT, LLC

Current Principal Place of Business:

2102 CAMP INDIAN HEAD RD
LAND O LAKES, FL 34639

Current Mailing Address:

2102 CAMP INDIAN HEAD RD
LAND O LAKES, FL 34639 FL

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAWRENCE, SARA JO
2102 CAMP INDIAN HEAD RD.
LAND O LAKES, FL 34639 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: SARA JO LAWRENCE

04/26/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name LAWRENCE, SARA JO
Address 2102 CAMP INDIAN HEAD RD
City-State-Zip: LAND O LAKES FL 34639

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: SARA JO LAWRENCE

MGR

04/26/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date