

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000112892

Entity Name: ADDAIR INSURANCE AGENCIES LLC

Current Principal Place of Business:

10332 MURRAY ROAD
CLERMONT, FL 34711

Current Mailing Address:

10332 MURRAY ROAD
CLERMONT, FL 34711

FEI Number: 82-0622361

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADDAIR, STEVEN H MR.
10332 MURRAY ROAD
CLERMONT, FL 34711 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: STEVEN ADDAIR

02/28/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name ADDAIR, STEVEN
Address 10332 MURRAY ROAD
City-State-Zip: CLERMONT FL 34711

Title T
Name ADDAIR, STEVEN
Address 10332 MURRAY ROAD
City-State-Zip: CLERMONT FL 34711

Title MGR
Name ADDAIR, DEBORAH
Address 10332 MURRAY ROAD
City-State-Zip: CLERMONT FL 34711

Title S
Name ADDAIR, DEBORAH
Address 10332 MURRAY ROAD
City-State-Zip: CLERMONT FL 34711

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: STEVEN ADDAIR

MANAGER

02/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date