

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000153004

Entity Name: INCEPTION INSURANCE GROUP LLC

Current Principal Place of Business:

1004 ECKLES DRIVE
TAMPA, FL 33612

Current Mailing Address:

1004 ECKLES DRIVE
TAMPA, FL 33612

FEI Number: 81-3587302

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAHA, SAGAR
1004 ECKLES DRIVE
TAMPA, FL 33612 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 MGR
Name SAHA, SAGAR
Address 1004 ECKLES DRIVE
City-State-Zip: TAMPA FL 33612

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: SAGAR SAHA

MGR

04/11/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date