## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000176840

Entity Name: MARTON INSURANCE SPECIALISTS, LLC

**Current Principal Place of Business:** 

2333 BRICKELL AVE. **SUITE 1215** MIAMI, FL 33129

## **Current Mailing Address:**

2333 BRICKELL AVE. **SUITE 1215** MIAMI, FL 33129 US

FEI Number: 81-4015532 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WEIDER, NORMAN S ESQ. 200 S. BISCAYNE BLVD. **6TH FLOOR** MIAMI, FL 33131 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: NORMAN WEIDER 01/14/2019

> Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGR Title MGR

Name OTERO, ARMANDO Name OTERO, MARTA

2333 BRICKELL AVE. ST. 1215 Address 2333 BRICKELL AVE. ST. 1215 Address

City-State-Zip: MIAMI FL 33129 City-State-Zip: MIAMI FL 33129

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.

01/14/2019 SIGNATURE: ARMANDO OTERO **MGR** 

**FILED** Jan 14, 2019

**Secretary of State** 

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