

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000190601

Entity Name: MPF INSURANCE LLC

Current Principal Place of Business:

4745 SW 8TH ST
MIAMI, FL 33134

Current Mailing Address:

4745 SW 8TH ST
MIAMI, FL 33134

FEI Number: 81-4171371

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MESA, ANA
10722 NW 10TH ST
PEMBROKE PINES, FL 33026 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: ANA MESA

03/05/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name PEREZ FELIPE, VLADIMIR
Address 12380 NW 11TH ST
City-State-Zip: MIAMI FL 33182

Title MGR
Name MESA, ANA I
Address 12380 NW 11TH ST
City-State-Zip: MIAMI FL 33182

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: ANA MESA

MGR

03/05/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date