

**2017 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:** 81-2960423

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RDNA ACCOUNTING SERVICES LLC  
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:** \_\_\_\_\_

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:** PEREZ FELIPE , VLADIMIR

MGR

02/10/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date