2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L16000196308

Entity Name: RAMON C RAIFORD INSURANCE LLC

Current Principal Place of Business:

8845 RAMBLEWOOD DR SUITE 1716 CORAL SPRINGS, FL 33071

Current Mailing Address:

8845 RAMBLEWOOD DR SUITE 1716 CORAL SPRINGS, FL 33071 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAIFORD, RAMON C 8845 RAMBLEWOOD DR SUITE 1716 CORAL SPRINGS, FL 33071 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: RAMON RAIFORD 05/06/2020

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGR

Name RAIFORD, RAMON C
Address 8845 RAMBLEWOOD DR

SUITE 1716

City-State-Zip: CORAL SPRINGS FL 33071

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: RAMON C RAIFORD MGR 05/06/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED May 06, 2020

Secretary of State

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