

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000121957

**Entity Name:** RAYMOND'S INSURANCE GROUP LLC

**Current Principal Place of Business:**

597 EAST SAMPLE RD  
SUITE B  
DEERFIELD BEACH, FL 33064

**Current Mailing Address:**

11270 NW 52 ST  
CORAL SPRINGS, FL 33076

**FEI Number: 82-1780318**

**Certificate of Status Desired:** No

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

JEAN, RAYMOND  
11270 NW 52 ST  
CORAL SPRINGS, FL 33076 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	Title	MGR
Name	JEAN, RAYMOND	Name	CADET, JACQUANNE
Address	11270 NW 52 ST	Address	11270 NW 52 ST
City-State-Zip:	CORAL SPRINGS FL 33076	City-State-Zip:	CORAL SPRINGS FL 33076

*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: RAYMOND JEAN**

**PRESIDENT**

**03/02/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date