2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2019
Secretary of State
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Entity Name: CAPITALROCK INSURANCE, LLC

Current Principal Place of Business:

1016 COLLIER CENTER WAY, STE 201
NAPLES, FL 34110

Current Mailing Address:

1016 COLLIER CENTER WAY, STE 201
NAPLES, FL 34110 US

FEI Number: 83-1641492

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIMPSON, KEVIN
1016 COLLIER CENTER WAY, STE 201
NAPLES, FL 34110 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	AMBR	Title	AMBR
Name	SIMPSON, KEVIN	Name	IRONS, JOANNA
Address	1016 COLLIER CENTER WAY, STE 201	Address	1016 COLLIER CENTER WAY, STE 201
City-State-Zip:	NAPLES FL 34110	City-State-Zip:	NAPLES FL 34110

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: KEVIN SIMPSON MEMBER 04/16/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date