2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000005484

Entity Name: NORTH AMERICAN ADVANTAGE INSURANCE SERVICES, LLC

FILED Apr 05, 2019 **Secretary of State** 3981253001CC

Current Principal Place of Business:

1707 MARKET PLACE SUITE 100 IRVING, TX 75063

Current Mailing Address:

760 NW 107TH AVENUE SUITE 400 MIAMI, FL 33172 US

FEI Number: 51-0540898 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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**

KELLER, CLOTILDE C Name Name GROSS, BRUCE

760 N.W. 107TH AVENUE Address Address 700 N.W. 107TH AVENUE

SUITE 400

City-State-Zip: MIAMI FL 33172 MIAMI FL 33172 City-State-Zip:

Title **SECRETARY** Title MGR

Name TABOR, CHRISTY PARDO, CRISTINA Name

760 NW 107TH AVENUE Address 700 N.W. 107TH AVENUE Address SUITE 400

MIAMI FL 33172 City-State-Zip: MIAMI FL 33172 City-State-Zip:

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.

Electronic Signature of Signing Authorized Person(s) Detail