

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M14000005517

**Entity Name:** LOSS SOLUTIONS GROUP LLC

**Current Principal Place of Business:**

3844 BOWFIN TRAIL  
KISSIMMEE, FL 34746

**Current Mailing Address:**

3844 BOWFIN TRAIL  
KISSIMMEE, FL 34746 US

**FEI Number:** 20-4051032

**Certificate of Status Desired:** No

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

CURTIS, STACEY  
3844 BOWFIN TRAIL  
KISSIMMEE, FL 34746 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 CFO  
Name CURTIS, STACEY  
Address 3844 BOWFIN TRAIL  
City-State-Zip: KISSIMMEE FL 34746

Title CEO  
Name CURTIS, RICHARD  
Address 3844 BOWFIN TRAIL  
City-State-Zip: KISSIMMEE FL 34746

*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:** STACEY CURTIS

**CFO**

**01/28/2019**

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

\_\_\_\_\_  
Date