#### 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: MARVIC MENDEZ

Electronic Signature of Signing Officer/Director Detail

DUCLOS, LINETT 14826 DEATON ALLEY ORLANDO, FL 32827 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

# **Officer/Director Detail :**

Title	Р	Title	VP
Name	DUCLOS, LINETT	Name	MENDEZ, MARVIC
Address	14826 DEATON ALLEY	Address	14826 DEATON ALLEY
City-State-Zip:	ORLANDO FL 32827	City-State-Zip:	ORLANDO FL 32827

## 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000089591

Entity Name: LINETT DUCLOS INSURANCE AGENCY INC

Name and Address of Current Registered Agent:

### **Current Principal Place of Business:**

1525 S ALAFAYA TRAIL 101 ORLANDO, FL 32828

## **Current Mailing Address:**

1525 S ALAFAYA TRAIL 101 ORLANDO, FL 32828 US

### FEI Number: 85-3991447

04/06/2023

Date

## FILED Apr 06, 2023 Secretary of State 9432108840CC

Date

Certificate of Status Desired: Yes