

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

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FILED
May 01, 2023
Secretary of State
2101118359CC

Entity Name: FIRST MILE INSURANCE COMPANY

Current Principal Place of Business:

505 SOUTH FLAGLER DRIVE, SUITE 700
WEST PALM BEACH, FL 33401

Current Mailing Address:

505 SOUTH FLAGLER DRIVE, SUITE 700
WEST PALM BEACH, FL 33401 US

FEI Number: 87-4002053

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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

Officer/Director Detail :

Title PD
Name JOFFE, MATTHEW
Address 505 SOUTH FLAGLER DRIVE, SUITE 700
City-State-Zip: WEST PALM BEACH FL 33401

Title VPD
Name MODIST, MATTHEW
Address 505 SOUTH FLAGLER DRIVE, SUITE 700
City-State-Zip: WEST PALM BEACH FL 33401

Title SD
Name TAYLOR, LANE
Address 505 SOUTH FLAGLER DRIVE, SUITE 700
City-State-Zip: WEST PALM BEACH FL 33401

Title TD
Name FAN, CAROL
Address 505 SOUTH FLAGLER DRIVE, SUITE 700
City-State-Zip: WEST PALM BEACH FL 33401

Title D
Name BLANCO, JULIE
Address 505 SOUTH FLAGLER DRIVE, SUITE 700
City-State-Zip: WEST PALM BEACH FL 33401

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: MATTHEW JOFFE

PRESIDENT

05/01/2023

Electronic Signature of Signing Officer/Director Detail

Date