Entity Name: C & L INSURANCE, INC.			0910249302CC	
	ncipal Place of Business: RPORATE BLVD., STE 121 FL 33431		0910243	50200
Current Mai	ling Address:			
	ORPORATE BLVD., STE 121 DN, FL 33431 US			
FEI Number: 65-0260433 Certificate of Status D				ired: Yes
Name and Address of Current Registered Agent:				
COSTOLO, CHARLES M 2295 NW CORPORATE BLVD 121 BOCA RATON, FL 33431 US				
BOCA RATON,	FL 33431 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	CHARLES MICHAEL COSTOLO			02/01/2021
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	D	Title	VP	
Name	COSTOLO, CHARLES MPRES	Name	COSTOLO, SCOTT CHARLES	
Address	2295 NW CORPORATE BLVD. #121	Address	2295 N.W. CORPORATE BLVD., STE 121	
City-State-Zip:	BOCA RATON FL 33431	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 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: CHARLES M. COSTOLO

PRESIDENT

02/01/2021

Electronic Signature of Signing Officer/Director Detail

FILED Feb 01, 2021 Secretary of State

DOCUMENT# S52337

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT