

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000023850

Entity Name: COASTAL CLAIMS COMPANY, LLC

Current Principal Place of Business:

5200 NORTH FLAGLER DRIVER
PLACEDO MAR #701
WEST PALM BEACH, FL 33407

Current Mailing Address:

424 GRAND OAKS DRIVE
APT, SUITE, FLOOR, ETC.
SHREVEPORT, LA 71106 US

FEI Number: 11-3771337

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COASTAL CLAIMS COMPANY
5200 NORTH FLAGLER DRIVE
PLACEDO MAR #701
WEST PALM BEACH, FL 33407 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: SUSAN JENKINS MCLENDON

01/27/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name JENKINS, SUSAN
Address 424 GRAND OAKS DRIVE
APT, SUITE, FLOOR, ETC.
City-State-Zip: SHREVEPORT LA 71106

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: SUSAN JENKINS MCLENDON

CEO/OWNER

01/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date