## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000085078

Entity Name: ABSOLUTE INSURANCE & FINANCIAL, LLC

**Current Principal Place of Business:** 

2057 GREY FALCON CIR SW VERO BEACH. FL 32962

**Current Mailing Address:** 

2057 GREY FALCON CIR SW VERO BEACH, FL 32962

FEI Number: 27-0861275 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARKAS, JOSEPH MJR 2057 GREY FALCON CIR SW VERO BEACH, FL 32962 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

FILED Apr 04, 2021

**Secretary of State** 

2457268270CC

## Authorized Person(s) Detail:

Title MGRM

Name MARKAS, JOSEPH MJR.

Address 2057 GREY FALCON CIR SW

City-State-Zip: VERO BEACH FL 32962

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: JOSEPH M MARKAS JR

**MGRM** 

04/04/2021