

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000120072

**Entity Name:** SERROD INSURANCE AGENCY, LLC

**Current Principal Place of Business:**

2151 S. LE JEUNE ROAD  
SUITE 302  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2151 S. LE JEUNE ROAD  
SUITE 302  
CORAL GABLES, FL 33134 US

**FEI Number:** 27-1652405

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

FLORIDA ANNUAL REPORT SERVICES, INC  
2300 CORAL WAY  
MIAMI, FL 33145 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

**Authorized Person(s) Detail :**

Title MGR  
Name CANTERA-SERRALTA, MONICA  
Address 2151 S. LE JEUNE ROAD  
SUITE 300  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name CRUZ-RODRIGUEZ, MELISSA  
Address 2151 S. LE JEUNE ROAD #302  
City-State-Zip: CORAL GABLES FL 33134

*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:** MONICA CANTERA-SERRALTA

MGR

04/27/2021

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date