

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000030255

Entity Name: INSURANCE LINE ONE LLC

Current Principal Place of Business:

43 S. POWERLINE RD #106
POMPANO BEACH, FL 33069

Current Mailing Address:

43 S. POWERLINE RD #106
POMPANO BEACH, FL 33069 US

FEI Number: 27-2147497

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARY I. HANDIN, P.A.
3111 UNIVERSITY DRIVE
605
CORAL SPRINGS, FL 33065 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: GARY I. HANDIN, PRESIDENT

03/13/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT, AUTHORIZED
 MEMBER/MANAGER
Name BASO, KRISTIAN
Address 43 S. POWERLINE RD #106
City-State-Zip: POMPANO BEACH FL 33069

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: KRISTIAN BASO

MANAGER

03/13/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date