

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000133693

Entity Name: WESTON RISK MANAGEMENT LLC**Current Principal Place of Business:**2600 GLADES CIRCLE
STE. 600
WESTON, FL 33327**Current Mailing Address:**2600 GLADES CIRCLE
STE. 600
WESTON, FL 33327 US**FEI Number:** 45-4048110**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WAINSZTEIN, JONATHAN
2600 GLADES CIRCLE STE. 600
WESTON, FL 33327 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:** JONATHAN WAINSZTEIN

01/24/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :Title MGRM
Name WAINSZTEIN, J. SERGIO
Address 2600 GLADES CIRCLE
STE. 600
City-State-Zip: WESTON FL 33327Title MGRM
Name WAINSZTEIN, JONATHAN
Address 2600 GLADES CIRCLE
STE. 600
City-State-Zip: WESTON FL 33327Title MGRM
Name JOHNSON, NATALIE
Address 2600 GLADES CIRCLE
STE. 600
City-State-Zip: WESTON FL 33327Title MGRM
Name WAINSZTEIN, NICOLE
Address 2600 GLADES CIRCLE
STE. 600
City-State-Zip: WESTON FL 33327Title MGRM
Name WAINSZTEIN, JEREMY
Address 2600 GLADES CIRCLE
STE. 600
City-State-Zip: WESTON FL 33327

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: NATALIE JOHNSON

MGRM

01/24/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date