

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000088649

Entity Name: SERENITY VILLAGE INSURANCE & CONSULTING, LLC

Current Principal Place of Business:

3420 S DALE MABRY HWY
STE S
TAMPA, FL 33629

Current Mailing Address:

3420 S DALE MABRY HWY
STE S
TAMPA, FL 33629 US

FEI Number: 46-0531209

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARTFIELD, GARY
3420 S DALE MABRY HWY
STE S
TAMPA, FL 33629 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 T. HARTFIELD

04/01/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name HARTFIELD, GARY
Address 3420 S. DALE MABRY HWY
UNIT S
City-State-Zip: TAMPA FL 33629

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: GARY T HARTFIELD

MANAGING MEMBER

04/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date