

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000135214

Entity Name: PECO INSURANCE, LLC.

Current Principal Place of Business:

1111 PARK CENTRE BLVD
SUITE 340
MIAMI, FL 33169

Current Mailing Address:

1111 PARK CENTRE BLVD
SUITE 340
MIAMI, FL 33169 US

FEI Number: 46-1253033

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BATISTA, JULIO C
1111 PARK CENTRE BLVD
SUITE 340
MIAMI, FL 33169 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: JULIO BATISTA

03/06/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MEMBER
Name BATISTA, JULIO CESAR
Address 1111 PARK CENTRE BLVD
SUITE 340
City-State-Zip: MIAMI FL 33169

Title MEMBER
Name DIAZ, ANNERYYS
Address 3500 MYSTIC POINTE DR
SUITE 1801
City-State-Zip: AVENTURA FL 33180

Title MANAGER
Name PACHECO, MARIA CRISTINA
Address 1111 PARK CENTRE BLVD
SUITE 340
City-State-Zip: MIAMI FL 33169

Title MANAGER
Name ZAMORA, DIANELYS
Address 1111 PARK CENTRE BLVD
SUITE 340
City-State-Zip: MIAMI FL 33169

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: JULIO BATISTA

AGENT

03/06/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date