

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000109032

Entity Name: GET INSURANCE LLC

Current Principal Place of Business:

13250 SW 96 TER
MIAMI , FL 33186

Current Mailing Address:

13250 SW 96 TER
MIAMI, FL 33186 US

FEI Number: 46-3336732

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FREGIO, MARLEEN
13250 SW 96 TER
MIAMI, FL 33186 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: MARLEEN FREGIO

01/13/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MARLEEN, FREGIO
Address 13250 SW 96 TER
City-State-Zip: MIAMI FL 33186

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: MARLEEN FREGIO

MANAGER

01/13/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date