

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000174892

Entity Name: PAIGE INSURANCE ADJUSTING., LLC

Current Principal Place of Business:

21819 TOWN PLACE DR.
BOCA RATON, FL 33433

Current Mailing Address:

21819 TOWN PLACE DR.
BOCA RATON, FL 33433 US

FEI Number: 46-4346370

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PAIGE, LISA K
21819 TOWN PLACE DR.
BOCA RATON, FL 33433 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name PAIGE, LISA K
Address 21819 TOWN PLACE DR.
City-State-Zip: BOCA RATON FL 33433

Title MGRM
Name PAIGE, GREGORY L
Address 21819 TOWN PLACE DR.
City-State-Zip: BOCA RATON FL 33433

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: PAIGE, GREGORY L

MGRM

04/04/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date