

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000006376

Entity Name: NOYLAN INSURANCE GROUP, LLC

Current Principal Place of Business:

9415 SUNSET DRIVE
SUITE 200
MIAMI, FL 33173

Current Mailing Address:

9415 SUNSET DRIVE
SUITE 200
MIAMI, FL 33173

FEI Number: 47-2754415

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONZALEZ, NOYLAN
16886 SW 143RD PL
MIAMI, FL 33177 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: NOYLAN GONZALEZ

03/18/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name GONZALEZ, NOYLAN
Address 16886 SW 143RD PL
City-State-Zip: MIAMI FL 33177

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: NOYLAN GONZALEZ

MANAGER

03/18/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date