## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000043415

Entity Name: ROISS INSURANCE AGENCY, PLLC

**Current Principal Place of Business:** 

555 WINDERLEY PLACE SUITE 300

MAITLAND, FL 32751

## **Current Mailing Address:**

555 WINDERLEY PLACE SUITE 300 MAITLAND, FL 32751 US

FEI Number: 81-1722821 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ROISS, ABRAHAM J 555 WINDERLEY PLACE SUITE 300 MAITLAND, FL 32751 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: ABRAHAM J ROISS 02/05/2025

Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title AGENCY PRINCIPAL

Name ROISS, ABRAHAM JACKSON

Address 555 WINDERLEY PLACE

SUITE 300

City-State-Zip: MAITLAND FL 32751

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: ABRAHAM J ROISS AGENCY PRINCIPAL 02/05/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Feb 05, 2025

**Secretary of State** 

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