

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000107956

Entity Name: PRACTICAL INSURANCE SOLUTIONS, LLC

Current Principal Place of Business:

4199 NAVAREZ WAY S
SAINT PETERSBURG, FL 33712

Current Mailing Address:

4199 NAVAREZ WAY S
SAINT PETERSBURG, FL 33712 US

FEI Number: 37-1706561

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WAKED, SHAWN
7901 4TH ST N
STE 300
ST PETERSBURG, FL 33702 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: SHAWN WAKED

01/27/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name WAKED, SHAWN
Address 4199 NAVAREZ WAY S
City-State-Zip: SAINT PETERSBURG FL 33712

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: SHAWN WAKED

MEMBER

01/27/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date