

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000229628

Entity Name: SEGUROS INSURANCE LLC

Current Principal Place of Business:

2607 SIMPSON ROAD
KISSIMMEE, FL 34744

Current Mailing Address:

2607 SIMPSON ROAD
KISSIMMEE, FL 34744 US

FEI Number: 81-4758785

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORALES, FELIX
2607 SIMPSON ROAD
KISSIMMEE, FL 34744 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 MANAGER
Name MORALES, FELIX
Address 2607 SIMPSON ROAD
City-State-Zip: KISSIMMEE FL 34744

Title AUTHORIZED MEMBER
Name MUNETT, VLADIMIR F
Address 993 DINERO DR
City-State-Zip: WINTER SPRINGS FL 32708

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: VLADIMIR F MUNETT

AUTHORIZED MEMBER

02/21/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date