

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000010338

Entity Name: SHIRIN KHORSANDIAN INSURANCE AND FINANCIAL
SERVICES LLC

Current Principal Place of Business:

5833 ARGERIAN DR #102
WESLEY CHAPEL, FL 33544

Current Mailing Address:

5833 ARGERIAN DR #102
WESLEY CHAPEL, FL 33544 US

FEI Number: 30-1165857

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KHORSANDIAN-SMITH, SHIRIN
5833 ARGERIAN DR. #102
WESLEY CHAPEL, FL 33544 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 KHORSANDIAN-SMITH, SHIRIN M
Address 5833 ARGERIAN DR. #102
City-State-Zip: WESLEY CHAPEL FL 33544

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: SHIRIN KHORSANDIAN-SMITH

AGENCY OWNER

01/26/2022

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date