

**2020 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L17000112390

**Entity Name:** RISK SOLUTIONS INSURANCE BROKERAGE LLC

**Current Principal Place of Business:**

5401 S KIRKMAN RD  
SUITE 725  
ORLANDO, FL 32819

**Current Mailing Address:**

5401 S KIRKMAN RD  
SUITE 725  
ORLANDO, FL 32819 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SINGH, RAJENDRA  
5401 S KIRKMAN RD  
SUITE 725  
ORLANDO, FL 32819 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:** RAJENDRA SINGH

03/30/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	AUTHORIZED MEMBER
Name	SINGH, RAJENDRA	Name	SINGH, NALINI
Address	5401 S KIRKMAN RD SUITE 725	Address	1401 LEE RD
City-State-Zip:	ORLANDO FL 32819	City-State-Zip:	ORLANDO FL 32810

*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:** RAJENDRA SINGH

MANAGER

03/30/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date