#### 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000256362

Entity Name: BLOOMINGDALE INSURANCE SERVICES, LLC

# **Current Principal Place of Business:**

1318 EAST LUMSDEN BRANDON, FL 33511

# **Current Mailing Address:**

1318 E. LUMSDEN RD BRANDON, FL 33511 US

FEI Number: 82-3726256 Certificate of Status Desired: No

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

ELLSWORTH, ANNA 1318 EAST LUMSDEN BRANDON, FL 33511 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

**FILED** Apr 06, 2020

**Secretary of State** 

0424082426CC

# Authorized Person(s) Detail:

Title MGR

Name ELLSWORTH, ANNA Address 1318 EAST LUMSDEN City-State-Zip: BRANDON FL 33511

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: ANNA ELLSWORTH

Electronic Signature of Signing Authorized Person(s) Detail

**OWNER** 

04/06/2020 Date