

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000258873

Entity Name: ONE & ONLY INSURANCE AGENCY, LLC

Current Principal Place of Business:

11 N 6TH ST
HAINES CITY, FL 33844

Current Mailing Address:

11 N 6TH ST
HAINES CITY, FL 33844 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAUTISTA, CAMILO A
11 N 6TH ST
HAINES CITY, FL 33844 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: CAMILO A BAUTISTA

04/19/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	BAUTISTA, CAMILO A	Name	VARGAS, SERGIO
Address	11 N 6TH ST	Address	11 N 6TH ST
City-State-Zip:	HAINES CITY FL 33844	City-State-Zip:	HAINES CITY FL 33844

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: SERGIO VARGAS

MGR

04/19/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date