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: NICHOLAS V D'ANGELO

Electronic Signature of Signing Authorized Person(s) Detail

Name and Address of Current Registered Agent:

D'ANGELO, NICHOLAS V . 1456 MARJOHN AVE CLEARWATER, FL 33756 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: NICHOLAS V D'ANGELO

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	AMBR
Name	D'ANGELO, NICHOLAS V
Address	1456 MARJOHN AVE
City-State-Zip:	CLEARWATER FL 33756

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000076428

Entity Name: DIRECT TO CONSUMER INSURANCE SERVICES, LLC

Current Principal Place of Business:

1456 MARJOHN AVE CLEARWATER, FL 33756

Current Mailing Address:

1456 MARJOHN AVE CLEARWATER. FL 33756 US

FEI Number: 82-4922072

FILED Feb 20, 2023 Secretary of State 3763980604CC

Certificate of Status Desired: No

Date

02/20/2023

02/20/2023 Date

AMBR