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

DOCUMENT# L18000138199

Entity Name: FREE SKY INSURANCE, LLC

**Current Principal Place of Business:** 

5200 SW 8TH ST STE 110

CORAL GABLES, FL 33134-2300

**Current Mailing Address:** 

5200 SW 8TH ST STE 110

CORAL GABLES, FL 33134--230 UN

FEI Number: 83-0828959 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, ILEANA 5200 SW 8TH ST STE 110 CORAL GABLES, FL 33134-2300 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 May 27, 2020

**Secretary of State** 

3722500727CC

Authorized Person(s) Detail:

Title P Title V

Name USECHES, DELBERT Name GARCIA, ILEANA M
Address 5200 SW 8TH ST Address 5200 SW 8TH ST

City-State-Zip: CORAL GABLES FL 33134-2300 City-State-Zip: CORAL GABLES FL 33134-2300

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.

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Electronic Signature of Signing Authorized Person(s) Detail