

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000184063

Entity Name: SHELTON INSURANCE LLC

Current Principal Place of Business:

8245 NW 200 TERRACE
MIAMI GARDENS, FL 33015

Current Mailing Address:

8245 NW 200 TERRACE
MIAMI GARDENS, FL 33015 US

FEI Number: 83-1475697

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHELTON, AL
8245 NW 200 TERRACE
MIAMI GARDENS, FL 33015 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

Authorized Person(s) Detail :

Title MGR
Name SHELTON, AL
Address 8245 NW 200 TERRACE
City-State-Zip: MIAMI GARDENS FL 33015

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: AL SHELTON

MGR

01/27/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date