

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000112566

Entity Name: SERENITE INSURANCE, LLC.

Current Principal Place of Business:

7880 W 20 AVE
HIALEAH, FL 33016

Current Mailing Address:

7880 W 20 AVE
SUITE 28
HIALEAH, FL 33016

FEI Number: 83-4628629

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PAZOS, XIOMARA
7760 W 20 AVE
HIALEAH, FL 33016 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 PAZOS, XIOMARA
Address 7760 W 20 AVE
City-State-Zip: HIALEAH FL 33016

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: XIOMARA PAZOS

MANAGER

03/07/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date