

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000119753

Entity Name: BEHNKE INSURANCE AGENCY, LLC

Current Principal Place of Business:

5406 MCKINLEY STREET
HOLLYWOOD, FL 33021

Current Mailing Address:

5406 MCKINLEY STREET
HOLLYWOOD, FL 33021

FEI Number: 84-1864729

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCARTHY BULMAN, MAURA
1779 N UNIVERSITY DRIVE
SUITE 202
HOLLYWOOD, FL 33024 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 AMBR
Name BEHNKE, FRED
Address 5406 MCKINLEY STREET
City-State-Zip: HOLLYWOOD FL 33021

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: FRED BEHNKE _____

AMBR

05/01/2021

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date