

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000156530

Entity Name: KING OF KINGS INSURANCE, LLC

Current Principal Place of Business:

455 LAKEVIEW DRIVE
PALM HARBOR, FL 34683

Current Mailing Address:

PO BOX 1873
TARPON SPRINGS, FL 34689 UN

FEI Number: 84-2446173

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCSUNAS, MICHAEL
455 LAKEVIEW DRIVE
PALM HARBOR, FL 34683 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 MCSUNAS, MICHAEL
Address 455 LAKEVIEW DRIVE
City-State-Zip: PALM HARBOR FL 34683

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: MICHAEL MCSUNAS

CEO

04/13/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date