

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000214114

Entity Name: DOMINGUEZ INSURANCE GROUP LLC

Current Principal Place of Business:

5901 NW 183RD ST
STE 101
HIALEAH, FL 33015

Current Mailing Address:

5901 NW 183RD ST
STE 101
HIALEAH, FL 33015 US

FEI Number: 84-2920368

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOMINGUEZ BARRIOS, YULIEN
5501 NW 189TH TER
MIAMI GARDENS, FL 33055 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 DOMINGUEZ BARRIOS, YULIEN
Address 5501 NW 189TH TER
City-State-Zip: MIAMI GARDENS FL 33055

Title MANAGER
Name DOMINGUEZ, YOANDRA
Address 5501 NW 189TH TER
City-State-Zip: MIAMI GARDENS FL 33055

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: YULIEN DOMINGUEZ BARRIOS

AMBR

04/15/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date