## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000223129

**Entity Name: BEST FLOOD INSURANCE LLC** 

**Current Principal Place of Business:** 

4803 GEORGE RD STE 310 TAMPA, FL 33634

**FILED** Apr 21, 2024 **Secretary of State** 8230471517CC

## **Current Mailing Address:**

4803 GEORGE RD STE 310 TAMPA, FL 33634 US

FEI Number: 86-2298107 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HUBBARD, BRADLEY A 4803 GEORGE RD STE 310 TAMPA, FL 33634 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: BRADLEY A. HUBBARD 04/21/2024

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title **AMBR** 

HUBBARD, BRADLEY A Name Name LOGAN, CHRISTOPHER R

4803 GEORGE RD 3001 NORTH ROCKY POINT DRIVE Address Address

STE 310 **EAST** 

SUITE 200 TAMPA FL 33634

City-State-Zip: TAMPA FL 33607 City-State-Zip:

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.

04/21/2024 SIGNATURE: BRADLEY HUBBARD PRESIDENT