# 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: ANGELO FERNEY OCAMPO

Electronic Signature of Signing Authorized Person(s) Detail

OWNER

04/07/2022

Date

#### 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L19000232483

Entity Name: QUICK & EZ INSURANCE LLC

## Current Principal Place of Business:

8891 BRIGHTON LANE SUITE 108 BONITA SPRINGS, 34135

# **Current Mailing Address:**

6251 PALM TRACE LANDINGS DR APT. 104 DAVIE, FL 33314 UN

# FEI Number: 83-1089831

## Name and Address of Current Registered Agent:

OCAMPO, ANGELO F OWNER 6251 PALM TRACE LANDINGS DR APT. 104 DAVIE, FL 33314 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

## Authorized Person(s) Detail :

Authorized Person(s) Detail.			
Title	MGR	Title	AMBR
Name	SIERRA, ESTEPHANIE	Name	OCAMPO, ANGELO
Address	8891 BRIGHTON LANE SUITE 108	Address	8891 BRIGHTON LANE SUITE 108
City-State-Zip:	BONITA SPRINGS 34135	City-State-Zip:	BONITA SPRINGS 34135

FILED Apr 07, 2022 Secretary of State 3462441132CC

Certificate of Status Desired: No

Date