

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000246155

Entity Name: ALERIO INSURANCE SERVICES, LLC

Current Principal Place of Business:

7955 NW 12TH ST
SUITE 312
DORAL, FL 33126

Current Mailing Address:

755 NW 12TH AVE
PLAZA 20 STE. 183
MIAMI, FL 33126 US

FEI Number: 84-3376147

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FUENTES, NIVIA
7955 NW 12TH ST
STE. 312
MIAMI, FL 33126 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: NIVIA FUENTES

01/26/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name FUENTES, NIVIA
Address 7955 NW 12TH ST
SUITE 312
City-State-Zip: DORAL FL 33126

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: NIVIA FUENTES

MGR

01/26/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date