

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000291641

**Entity Name:** UNITED ANGELS INSURANCE AGENCY, LLC

**Current Principal Place of Business:**

696 SW BOBCAT DR  
FORT WHITE, FL 32038

**Current Mailing Address:**

696 SW BOBCAT DR  
FORT WHITE, FL 32038 US

**FEI Number: 84-3766840**

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DAVIS-HOLMES, FELISA A  
696 SW BOBCAT DR  
FORT WHITE, FL 32038 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 DAVIS-HOLMES, FELISA A  
Address 696 SW BOBCAT DR  
City-State-Zip: FORT WHITE FL 32038

*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:** FELISA ANN DAVIS-HOLMES

MGR

04/24/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date