

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000018995

**Entity Name:** 2019 TC INSURANCE TRUST, LLC

**Current Principal Place of Business:**

3850 BIRD RD 8TH FLOOR  
MIAMI, FL 33146

**Current Mailing Address:**

3850 BIRD RD 8TH FLOOR  
MIAMI, FL 33146 US

**FEI Number:** 84-4466084

**Certificate of Status Desired:** No

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

HASNER, MARK M  
ONE SE 3RD AVE STE 2950  
MIAMI, FL 33131 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 CABRERIZO, VIVIAN  
Address 3850 BIRD RD 8TH FLOOR  
City-State-Zip: MIAMI FL 33146

*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:** VIVIAN CABRERIZO

MGR

01/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date