# 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

Electronic Signature of Signing Authorized Person(s) Detail

FEI Number: 84-5143913

INSURANCE 5575 S. SEMORAN BLVD. 36 ORLANDO, FL 32822 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: COURTNEY LUCAS

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

Title AMBR LUCAS, COURTNEY Name Address 235 140TH AVE. E. City-State-Zip: MADEIRA BEACH FL 33708

that my name appears above, or on an attachment with all other like empowered. 10/04/2021 SIGNATURE: COURTNEY LUCAS PRESIDENT

<u>2021</u>	FLORIDA	LIMITED L	COMPANY	REINSTATEMEN

#### DOCUMENT# L20000074908

Entity Name: GURU ESTIMATING AND APPRAISALS LLC

#### **Current Principal Place of Business:**

235 140TH AVE, E. MADEIRA BEACH, FL 33708

#### **Current Mailing Address:**

235 140TH AVE. E. MADEIRA BEACH. FL 33708 US

# Name and Address of Current Registered Agent:

10/04/2021 Date

Date

## FILED Oct 04, 2021 Secretary of State 9475358044CR

Certificate of Status Desired: No