

2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L20000084716

Entity Name: SAILFISH CLAIMS LLC

Current Principal Place of Business:

2519 SW EGRET POND CIR.
PALM CITY, FL 34990

Current Mailing Address:

2519 SW EGRET POND CIR.
PALM CITY, FL 34990 US

FEI Number: 85-0523799

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
5575 S. SEMORAN BLVD.
SUITE 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: CHEYENNE MOSELEY

10/01/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name SWANN, DEVON G
Address 2519 SW EGRET POND CIR.
City-State-Zip: PALM CITY FL 34990

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: DEVON G SWANN

AMBR

10/01/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date