

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000160273

Entity Name: SOFLA INSURANCE ASSOCIATES, LLC

Current Principal Place of Business:

ONE WEST LAS OLAS BLVD
500
FORT LAUDERDALE, FL 33301

Current Mailing Address:

3349 BRADENHAM LANE
DAVIE, FL 33328 UN

FEI Number: 85-1463393

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INTERNOSCIA, MICHAEL
3349 BRADENHAM LANE
DAVIE, FL 33328 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 AMBR
Name INTERNOSCIA, MICHAEL
Address 3349 BRADENHAM LANE
City-State-Zip: DAVIE 33328

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: MICHAEL INTERNOSCIA

AMBR

01/21/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date