

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000188575

Entity Name: GENERATIONAL LIFE INSURANCE LLC

Current Principal Place of Business:

415 6TH AVENUE SOUTHWEST
LARGO, FL 33770

Current Mailing Address:

415 6TH AVENUE SOUTHWEST
LARGO, FL 33770

FEI Number: 85-3641134

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
7901 4TH ST N
STE 300
ST. PETERSBURG, FL 33702 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 MONGO, MAKEDA
Address 415 6TH AVENUE SOUTHWEST
City-State-Zip: LARGO FL 33770

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: MAKEDA MONGO

AMBR

02/04/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date