

**2022 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:**

MONGO, MAKEDA  
415 6TH AVE SW  
LARGO, FL 33770 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

01/24/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date