

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000259852

Entity Name: 1ST RESPONDERS INSURANCE LLC

Current Principal Place of Business:

7000 PALMETTO PARK RD
STE 210
BOCA RATON, FL 33433

Current Mailing Address:

7000 PALMETTO PARK RD
STE 210
BOCA RATON, FL 33433 US

FEI Number: 85-2648577

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAGOMORPH MANAGEMENT INC
7000 PALMETTO PARK RD
STE 210
BOCA RATON, FL 33433 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 MGR
Name LAGOMORPH MANAGEMENT INC.
Address 7000 PALMETTO PARK RD, STE 210
City-State-Zip: BOCA RATON FL 33433

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: PATRICK POINTU

PST

01/05/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date