

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000267795

Entity Name: DECA INSURANCE LLC

Current Principal Place of Business:

6965 PIAZZA GRANDE AVE
STE 407
ORLANDO, FL 32835

Current Mailing Address:

6965 PIAZZA GRANDE AVE
STE 407
ORLANDO, FL 32835 US

FEI Number: 85-2938654

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONNECTION CONSULTING LLC
7450 DR PHILLIPS BLVD
STE 303
ORLANDO, FL 32819 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: TALITA BENDILATTI

04/11/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT
Name MELO GONCALVES, EDUARDO
Address 16272 SILVER GROVE BLVD
City-State-Zip: WINTER GARDEN FL 34787

Title VP
Name LIMA GONCALVES, MICHELY S
Address 16272 SILVER GROVE BLVD
City-State-Zip: WINTER GARDEN FL 34787

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: EDUARDO MELO GONCALVES

PRESIDENT

04/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date