

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000395237

**Entity Name:** NP INSURANCE SERVICES, LLC

**Current Principal Place of Business:**

1411 NW 86TH LN  
PLANTATION, FL 33322

**Current Mailing Address:**

1411 NW 86TH LN  
PLANTATION, FL 33322 US

**FEI Number: 86-3380807**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PODESTA, NICHOLAS  
1411 NW 86TH LN  
PLANTATION, FL 33322 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 PODESTA, NICHOLAS  
Address 1411 NW 86TH LN  
City-State-Zip: PLANTATION FL 33322

*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: NICHOLAS PODESTA**

**CEO**

**04/27/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date