

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000039918

Entity Name: RXINSURANCE LLC

Current Principal Place of Business:

4300 S. HIGHWAY 27,
203-A
CLERMONT, FL 34711

Current Mailing Address:

4300 S, HIGHWAY 27
203-A
CLERMONT, FL 34711 US

FEI Number: 86-2086398

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GAINZA RODRIGUEZ, YECENIA N
13364 HIGHLAND WOODS DRIVE
CLERMONT, FL 34711 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 LUIS, A ANGULO MALAVE
Address 13364 HIGHLAND WOODS DR
City-State-Zip: CLERMONT FL 34714

Title CEO
Name GAINZA, YECENIA N
Address 13364 HIGHLAND WOODS DRIVE
City-State-Zip: CLERMONT FL 34711

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: YECENIA GAINZA

CEO

03/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date