

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000105507

Entity Name: PROPER INSURANCE ADVISORS, LLC

Current Principal Place of Business:

3233 THOMASVILLE ROAD
TALLAHASSEE, FL 32308

Current Mailing Address:

3233 THOMASVILLE ROAD
TALLAHASSEE, FL 32308 US

FEI Number: 86-2412701

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PROPER LAW
3233 THOMASVILLE ROAD
TALLAHASSEE, FL 32308 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	Title	MGR
Name	GRULICH, DAVID	Name	CHASON, NICHOLAS
Address	3233 THOMASVILLE ROAD	Address	3233 THOMASVILLE ROAD
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	TALLAHASSEE FL 32308

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: DAVID GRULICH

MANAGER

04/22/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date