

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000337972

**Entity Name:** ENVISION ASSURANCE, LLC

**Current Principal Place of Business:**

1200 BRICKELL AVE.  
700  
MIAMI, FL 33131

**Current Mailing Address:**

1200 BRICKELL AVE.  
700  
MIAMI, FL 33131 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

RIQUEZES, LUIS  
1200 BRICKELL AVE.  
700  
MIAMI, FL 33131 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 QUINTERO, JESUS A  
Address 1200 BRICKELL AVE. SUITE 700  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name RIQUEZES, LUIS  
Address 1200 BRICKELL AVE. SUITE 700  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name GONZALEZ, IBRAHIM  
Address 2385 NW EXECUTIVE CENTER DR.  
SUITE 100  
City-State-Zip: BOCA RATON FL 33431

*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:** LUIS RIQUEZES

MGR

04/25/2023

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date