

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000346351

**Entity Name:** INSURE ME TEAM LLC

**Current Principal Place of Business:**

1265 SABAL TRAIL  
WESTON, FL 33327

**Current Mailing Address:**

1265 SABAL TRAIL  
WESTON, FL 33327 US

**FEI Number:** 87-2120362

**Certificate of Status Desired:** No

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

LOPEZ DE GRANADILLO, CARLA A  
1265 SABAL TRAIL  
WESTON, FL 33327 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:** CARLA A LOPEZ DE GRANADILLO

04/23/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name LOPEZ DE GRANADILLO, CARLA A  
Address 1265 SABAL TRAIL  
City-State-Zip: WESTON FL 33327

Title MGR  
Name GRANADILLO CURIEL, EURO T  
Address 1265 SABAL TRAIL  
City-State-Zip: WESTON FL 33327

*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:** CARLA LOPEZ DE GRANADILLO

MGR

04/23/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date