

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000378612

**Entity Name:** LET US ADJUST CONSULTANT INSURANCE LLC

**Current Principal Place of Business:**

7380 W SAND LAKE RD  
SUITE 500  
ORLANDO, FL 32819

**Current Mailing Address:**

7380 W SAND LAKE RD  
SUITE 500  
ORLANDO, FL 32819 US

**FEI Number:** 87-2338515

**Certificate of Status Desired:** No

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

CESAR, CEPEDA  
7380 W SAND LAKE RD  
SUITE 500  
ORLANDO, FL 32819 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:** CESAR CEPEDA

05/26/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name CEPEDA JIMENEZ, CESAR  
Address 7380 W SAND LAKE RD SUITE 500  
City-State-Zip: ORLANDO FL 32819

*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:** CESAR CEPEDA JIMENEZ

MANAGER

05/26/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date