

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000532358

Entity Name: NO HASSLE HEALTH QUOTES, LLC

Current Principal Place of Business:

1079 KELLY CREEK CIRCLE
OVIEDO, FL 32765

Current Mailing Address:

1079 KELLY CREEK CIRCLE
OVIEDO, FL 32765

FEI Number: 87-4180999

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARNOLD, KAYLA S
1079 KELLY CREEK CIRCLE
OVIEDO, FL 32765 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: KAYLA S ARNOLD

04/01/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name ARNOLD, KAYLA S
Address 1079 KELLY CREEK CIRCLE
City-State-Zip: OVIEDO FL 32765

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: KAYLA ARNOLD

MGR

04/01/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date