#### 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000013897

Entity Name: SECUREFAMILY INSURANCE SOLUTIONS, LLC

FILED Feb 07, 2023 Secretary of State 6280504025CC

## **Current Principal Place of Business:**

7901 4TH ST N STE 300 ST. PETERSBURG. FL 33702

## **Current Mailing Address:**

7901 4TH ST N STE 300

ST. PETERSBURG, FL 33702 US

FEI Number: 87-4493150 Certificate of Status Desired: No

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

NORTHWEST REGISTERED AGENT LLC 7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702 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 AUTHORIZED MEMBER
Name MONSALVE, LAURA
Address 7901 4TH ST N STE 300

City-State-Zip: ST. PETERSBURG FL 33702

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: LAURA MONSALVE

Electronic Signature of Signing Authorized Person(s) Detail

02/07/2023

**MEMBER** 

Date