## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000149935

Entity Name: DEVI INSURANCE LLC

**Current Principal Place of Business:** 

26037 SOUTH DIXIE HWY NARANJA. FL 33032

## **Current Mailing Address:**

17720 SW 107TH AVE 103

MIAMI, FL 33157 US

FEI Number: 88-1751591

Certificate of Status Desired: No

**FILED** Feb 10, 2024

**Secretary of State** 

8750749068CC

Name and Address of Current Registered Agent:

DE VICENTE, LEYDIS A 17720 SW 107 AVE 103 MIAMI, FL 33157 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 **AMBR** 

DE VICENTE, LEYDIS A Name 17720 SW 107 AVE APT 103 Address

City-State-Zip: MIAMI FL 33157

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.