

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000205957

Entity Name: SUNSHINE INSURANCE SOLUTIONS LLC

Current Principal Place of Business:

7842 LAND O LAKES BLVD.
235
LAND O LAKES, FL 34638

Current Mailing Address:

7842 LAND O LAKES BLVD.
235
LAND O LAKES, FL 34638 US

FEI Number: 88-2368570

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GORMAN, JANEEN
22959 SKYVIEW CIRCLE
BROOKSVILLE, FL 34602 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: JANEEN GORMAN

01/08/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name GHALIEH, LINDA
Address 7842 LAND O LAKES BLVD.
 235
City-State-Zip: LAND O LAKES FL 34638

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: LINDA GHALIEH

MANAGER

01/08/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date