

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000361991

Entity Name: FLORIDA CLAIM ADJUSTER ACADEMY LLC

Current Principal Place of Business:

7969 SW 87TH TERR
GAINESVILLE, FL 32608

Current Mailing Address:

7969 SW 87TH TERR
GAINESVILLE, FL 32608 US

FEI Number: 88-3831736

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COX, MICHAEL R
7969 SW 87TH TERR
GAINESVILLE, FL 32608 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 MGR
Name COX, MICHAEL R
Address 7969 SW 87TH TERR
City-State-Zip: GAINESVILLE FL 32608

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: MICHAEL COX

MR.

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date