

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000390698

Entity Name: YOUR AUTO INSURANCE GROUP LLC

Current Principal Place of Business:

11180 W FLAGLER ST
SUITE 17
MIAMI, FL 33174

Current Mailing Address:

11180 W FLAGLER ST
SUITE 17
MIAMI, FL 33174 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VEITIA, NOEL
780 NW 42ND AVE
SUITE 324
MIAMI, FL 33126 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
Name VEITIA, NOEL
Address 780 NW 42ND AVE SUITE 324
City-State-Zip: MIAMI FL 33126

Title AMBR
Name GONZALEZ, CARLOS I
Address 2010 SW 125 CT
City-State-Zip: MIAMI FL 33175

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: NOEL VEITIA

AMBR

04/03/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date