

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000111016

Entity Name: JC INSURANCE AGENT LLC

Current Principal Place of Business:

3423 EAST SILVER SPRINGS BLVD UNIT 2B
OCALA, FL 34470

Current Mailing Address:

3423 EAST SILVER SPRINGS BLVD UNIT 2B
OCALA, FL 34470 US

FEI Number: 92-2991452

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASTILLO FALCON, JENNYRE M
23 WALNUT PL
OCALA, FL 34480 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 MANAGER
Name CASTILLO FALCON, JENNYRE
 MARISOL
Address 3423 EAST SILVER SPRINGS BLVD
 UNIT 2B
City-State-Zip: Ocala FL 34470

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: JENNYRE CASTILLO FALCON

MANAGER

03/18/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date