

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000264803

Entity Name: DLS INSURANCE GROUP, LLC

Current Principal Place of Business:

20801 BISCAYNE BLVD
SUITE 340
AVENTURA, FL 33180

Current Mailing Address:

20801 BISCAYNE BLVD
SUITE 340
AVENTURA, FL 33180 US

FEI Number: 83-3007691

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAFAEL LUGIOYO
20801 BISCAYNE BLVD
SUITE 340
AVENTURA, FL 33180 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 DE LAS SALAS, ROBERTO
Address 17111 BISCAYNE BLVD
APT 1107
City-State-Zip: AVENTURA FL 33160

Title MGR
Name LUGIOYO, RAFAEL A
Address 2950 NE 188TH ST
APT 119
City-State-Zip: AVENTURA FL 33180

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: ROBERTO DE LAS SALAS

MGR

03/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date