2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 25, 2025
Secretary of State
5086443398CC

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Entity Name: TIFFANY J INSURANCE AGENCY LLC

Current Principal Place of Business:

13475 ATLANTIC BLVD UNIT 8 SUITE 799
JACKSONVILLE, FL 32225

Current Mailing Address:

13475 ATLANTIC BLVD
UNIT 8 SUITE 799
JACKSONVILLE, FL 32225 US

FEI Number: 99-3745213

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JORDAN, MICHAEL
13475 ATLANTIC BLVD
UNIT 8 SUITE 799
JACKSONVILLE, FL 32225 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	P	Title	MGR
Name	JORDAN, MICHAEL	Name	ROSELLE, MEGAN
Address	13475 ATLANTIC BLVD UNIT 8 SUITE 799	Address	13475 ATLANTIC BLVD UNIT 8 SUITE 799
City-State-Zip:	JACKSONVILLE FL 32225	City-State-Zip:	JACKSONVIILE FL 32225

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 JORDAN PRESIDENT 02/25/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date