

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M15000002732

**Entity Name:** SUNSTATE INSURANCE AGENCY, LLC

**Current Principal Place of Business:**

2375 E CAMELBACK ROAD STE 500  
PHOENIX, AZ 85016

**Current Mailing Address:**

1277 TREAT BLVD, SUITE 1000  
WALNUT CREEK, CA 94597 US

**FEI Number:** 46-4799566

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION, FL 33324 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	SECRETARY	Title	MANAGER
Name	MORELAND, KAMILI	Name	AAA ARIZONA, INC.
Address	1277 TREAT BLVD, SUITE 1000	Address	2375 E CAMELBACK ROAD STE 500
City-State-Zip:	WALNUT CREEK CA 94597	City-State-Zip:	PHOENIX AZ 85016

*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:** KAMILI MORELAND

**SECRETARY**

**02/05/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date