

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M19000003558

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

**Current Principal Place of Business:**

101 W. 6TH STREET  
5TH FLOOR  
AUSTIN, TX 78701

**FILED**  
**Apr 24, 2023**  
**Secretary of State**  
**7458231034CC**

**Current Mailing Address:**

101 W. 6TH STREET  
5TH FLOOR  
AUSTIN, TX 78701 US

**FEI Number: 83-4061522**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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           ROBERTO, NICHOLAS  
Address        101 W. 6TH STREET  
                  5TH FLOOR  
City-State-Zip: AUSTIN TX 78701

*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: NANCY SELF** \_\_\_\_\_

**AUTHORIZED SIGNATOR   04/24/2023**

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date