

**2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M19000011682

**Entity Name:** LEMONADE LIFE INSURANCE AGENCY, LLC

**Current Principal Place of Business:**

3080 N. CIVIC CENTER PLAZA  
SCOTTSDALE, AZ 85251

**Current Mailing Address:**

5 CROSBY STREET  
FLOOR 3  
NEW YORK, NY 10013 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

UNITED CORPORATE SERVICES, INC  
9200 SOUTH DADELAND BLVD.  
STE:508  
MIAMI, FL 33156 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 MBR  
Name LEMONADE, INC.  
Address 5 CROSBY STREET, FLOOR 3  
City-State-Zip: NEW YORK NY 10013

*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:** TIMOTHY BIXBY

**CFO**

**03/30/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date