

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019949

Entity Name: AGRICULTURAL RISK MANAGEMENT, LLC

Current Principal Place of Business:

8005 WINGED FOOT DRIVE
FORT MYERS, FL 33967

Current Mailing Address:

8005 WINGED FOOT DRIVE
FORT MYERS, FL 33967 US

FEI Number: 03-0479190

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TROYER, TREVOR
8005 WINGED FOOT DRIVE
FORT MYERS, FL 33967 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: TREVOR TROYER

04/21/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRT
Name TROYER, TREVOR
Address 8005 WINGED FOOT DRIVE
City-State-Zip: FORT MYERS FL 33967

Title MGRS
Name TROYER, SUZANNE
Address 8005 WINGED FOOT DRIVE
City-State-Zip: FORT MYERS FL 33967

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: TREVOR TROYER

MANAGER

04/21/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date