

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020032

Entity Name: NATIONAL INSURANCE BROKERAGE, LLC

Current Principal Place of Business:

2101 PARK CENTER DRIVE
SUITE 170
ORLANDO, FL 32835

Current Mailing Address:

2101 PARK CENTER DRIVE
SUITE 170
ORLANDO, FL 32835 US

FEI Number: 57-1170114

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR
STE A
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	KIRBY, K. SCOTT
Address	2101 PARK CENTER DRIVE SUITE 170
City-State-Zip:	ORLANDO FL 32835
Title	MANAGER
Name	MCNEALY, T. SEAN
Address	6131 GROSVENOR SHORE DR.
City-State-Zip:	WINDERMERE FL 34786

Title	MANAGER
Name	GANOVSKY, MATTHEW
Address	11450 LAKE BUTLER BLVD.
City-State-Zip:	WINDERMERE FL 34786
Title	VP OF FINANCE
Name	TELLER, KAREN
Address	2101 PARK CENTER DRIVE SUITE 170
City-State-Zip:	ORLANDO FL 32835

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: MATTHEW GANOVSKY

MEMBER

03/03/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date