

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000019147

**FILED**  
**Mar 19, 2019**  
**Secretary of State**  
**3193735877CC**

**Entity Name:** INSUALCA INTERNATIONAL GROUP, LLC

**Current Principal Place of Business:**

201 ALHAMBRA CIRCLE, SUITE 700  
C/O ARVESU & ASSOCIATES, PLLC  
CORAL GABLES, FL 33134

**Current Mailing Address:**

9614 PRESTMONT PL, FRISCO TEXAS 75035  
9614 PRESTMONT  
FRISCO, TX 75035 US

**FEI Number:** 20-2401062

**Certificate of Status Desired:** No

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

SUAREZ, ORLANDO  
2853 EXECUTIVE PARK DR.  
STE 201  
WESTON, FL 33331 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:** ORLANDO SUAREZ

03/19/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ORLANDO JAVIER SUAREZ RAMIREZ  
Address 201 ALHAMBRA CIRCLE, SUITE 700  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name MARIA WALESWKA SUAREZ RAMIREZ  
Address 201 ALHAMBRA CIRCLE SUITE 700  
City-State-Zip: CORAL GABLES FL 33134

Title T  
Name CARRATUS, CARLOS E  
Address 201 ALHAMBRA CIRCLE, SUITE 700  
City-State-Zip: CORAL GABLES FL 33134

Title MANAGER  
Name RICARDO, WLADIMIRO CIOFULI  
Address 201 ALHAMBRA CIRCLE, SUITE 700  
C/O ARVESU & ASSOCIATES, PLLC  
City-State-Zip: CORAL GABLES FL 33134

*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:** MARIA

ORLANDO SUAREZ

03/19/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date