

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035409

Entity Name: ADAMS INSURANCE AGENCY, LLC

Current Principal Place of Business:

8830 S. TAMIAMI TRAIL,
SUITE 140
SARASOTA, FL 34238

Current Mailing Address:

4059 PALAU DRIVE
SARASOTA, FL 34241 US

FEI Number: 20-2658493

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KITAY, LAURA A
4059 PALAU DRIVE
SARASOTA, FL 34241 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 MGRM
Name KITAY, LAURA A
Address 4059 PALAU DRIVE
City-State-Zip: SARASOTA FL 34241

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: LAURA KITAY

MGRM

01/02/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date