## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000054433

Entity Name: SPALDING INSURANCE GROUP, LLC

**Current Principal Place of Business:** 

2211 NORTH PARADISE CIRCLE WICHITA, KS 67205

## **Current Mailing Address:**

2211 NORTH PARADISE CIRCLE WICHITA, KS 67205 US

FEI Number: 20-2922862 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LINDSAY, SPALDING 10530 SW 57 AVE PINECREST, 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

FILED Feb 05, 2024

**Secretary of State** 

7044595975CC

## Authorized Person(s) Detail:

Title PRESIDENT

Name SPALDING-STEVEN, LINDSAY
Address 2211 NORTH PARADISE CIRCLE

City-State-Zip: WICHITA KS 67205

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: LINDSAY SPALDING-STEVEN

**OWNER** 

02/05/2024