

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093404

Entity Name: BULLTICK INSURANCE AGENCY, LLC**Current Principal Place of Business:**333 SE 2ND AVENUE
SUITE 3950
MIAMI, FL 33131**Current Mailing Address:**333 SE 2ND AVENUE
SUITE 3950
MIAMI, FL 33131 US**FEI Number:** 20-3857627**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	BANUELOS, HUMBERTO
Address	333 SE 2ND AVENUE SUITE 3950
City-State-Zip:	MIAMI FL 33131

Title	MANAGER
Name	DEL CUETO, ADOLFO
Address	333 SE 2ND AVENUE SUITE 3950
City-State-Zip:	MIAMI FL 33131

Title	MANAGER
Name	HERRERA, WILLIAM A
Address	333 SE 2ND AVENUE SUITE 3950
City-State-Zip:	MIAMI FL 33131

Title	MANAGER
Name	CAMPOS, JUAN CARLOS
Address	333 SE 2ND AVENUE SUITE 3950
City-State-Zip:	MIAMI FL 33131

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: WILLIAM HERRERA

MANAGER

03/25/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date