

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000117737

Entity Name: SUPER INSURANCE OF SOUTH WEST FLORIDA LLC

Current Principal Place of Business:

9001 HIGHLAND WOODS BLVD
SUITE 4
BONITA SPRINGS, FL 34135

Current Mailing Address:

9001 HIGHLAND WOODS BLVD
SUITE 4
BONITA SPRINGS, FL 34135 US

FEI Number: 13-4363716

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MURPHY, STEPHEN F
15451 N MALLARD LN
FORT MYERS, FL 33913 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: STEPHEN MURPHY

01/16/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	AUTHORIZED MEMBER
Name	MURPHY, STEVE F	Name	HANCOCK, PAUL
Address	9001 HIGHLAND WOODS BLVE STE 4	Address	21112 BRAXFIELD LOOP
City-State-Zip:	BONITA SPRINGS FL 34135	City-State-Zip:	ESTERO FL 33928

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: STEVE F MURPHY

OWNER

01/16/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date