

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000013374

Entity Name: RICKY LEE INSURANCE, LLC

Current Principal Place of Business:

827 BROOKWOOD DRIVE
LAKELAND, FL 33813

Current Mailing Address:

827 BROOKWOOD DR
LAKELAND, FL 33813

FEI Number: 26-4155814

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEE, RICKY
827 BROOKWOOD DR
LAKELAND, FL 33813 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 MGR
Name LEE, RICKY
Address 827 BROOKWOOD DR
City-State-Zip: LAKELAND FL 33813

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: RICKY LEE

MANAGER

01/22/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date