## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L10000050040

#### Entity Name: DONNA CARRARA INSURANCE AGENCY, LLC

## **Current Principal Place of Business:**

555 SAWGRASS CORPORATE PARKWAY SUNRISE, FL 33325

## **Current Mailing Address:**

555 SAWGRASS CORPORATE PARKWAY SUNRISE, FL 33325 US

## FEI Number: 27-2542186

## Name and Address of Current Registered Agent:

CARRARA, DONNA 555 SAWGRASS CORPORATE PARKWAY SUNRISE, FL 33325 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

## Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	CARRARA, DONNA	Name	CARRARA, CHRISTINA
Address	555 SAWGRASS CORPORATE PARKWAY	Address	555 SAWGRASS CORPORATE PARKWAY
City-State-Zip:	SUNRISE FL 33325	City-State-Zip:	SUNRISE FL 33325
Title	Ρ		
Title Name	P CARRARA, DONNA		
Name	CARRARA, DONNA 555 SAWGRASS CORPORATE		

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: DONNA CARRARA

OWNER

04/12/2023

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Apr 12, 2023 Secretary of State 1519273039CC

Certificate of Status Desired: No