#### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000015120

Entity Name: INSURANCE SOLUTIONS OF THE TREASURE COAST LLC

FILED Feb 06, 2019 Secretary of State 6107059553CC

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

1803 S 25TH STREET STE. #2 FORT PIERCE. FL 34947

## **Current Mailing Address:**

1803 S 25TH STREET STE. #2 FORT PIERCE, FL 34947 US

FEI Number: 45-4422701 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

VEGA, SUSAN MARIE 7904 CITRUS PARK BLVD FORT PIERCE, FL 34951 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

Date

## Authorized Person(s) Detail:

TitleMGRMTitleMANAGERNameVEGA, SUSAN MARIANameVEGA, JOEL

Address 7904 CITRUS PARK BLVD Address 7904 CITRUS PARK BLVD

City-State-Zip: FORT PIERCE FL 34951 City-State-Zip: FORT PIERCE FL 34951

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: SUSAN VEGA MANAGER 02/06/2019