

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000054094

Entity Name: DELOUIS INSURANCE GROUP, LLC

Current Principal Place of Business:

6191 W ATLANTIC BLVD
4
MARGATE, FL 33063

Current Mailing Address:

6191 W ATLANTIC BLVD
4
MARGATE, FL 33063 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DELOUIS, FRITZ R
6191 W ATLANTIC BLVD
4
MARGATE, FL 33063 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	Title	MGR
Name	DELOUIS, FRITZ R	Name	DELOUIS, CLAIRE V
Address	6191 W ATLANTIC BLVD 4	Address	6191 W ATLANTIC BLVD 4
City-State-Zip:	MARGATE FL 33063	City-State-Zip:	MARGATE FL 33063

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: CLAIRE DELOUIS

MGR

01/15/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date