2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000154921

Entity Name: FAIL SAFE ACCOUNTING LLC

Current Principal Place of Business:

20 S ROSE AVE SUITE 4

KISSIMMEE, FL 34741

Current Mailing Address:

20 S ROSE AVE SUITE 4 KISSIMMEE, FL 34741 US

FEI Number: 46-1549004 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FAIL SAFE INSURANCE LLC 20 S ROSE AVE SUITE 4 KISSIMMEE, FL 34741 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: FARAH CRUZ 05/01/2023

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGRM

Name FAIL SAFE INSURANCE LLC

Address 20 S ROSE AVE

SUITE 4

City-State-Zip: KISSIMMEE FL 34741

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: FAIL SAFE INSURANCE LLC

MGRM

05/01/2023

FILED May 01, 2023

Secretary of State

3392230566CC

Date