2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000006148

Entity Name: INSURANCE PLUS OF PALM BEACH LLC

Current Principal Place of Business:

7136 SOUTH MILITARY TRL #1 LAKE WORTH. FL 33463

Current Mailing Address:

7136 SOUTH MILITARY TRL #1 LAKE WORTH, FL 33463 US

FEI Number: 46-1853569 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JEAN, WILFRID 7136 SOUTH MILITARY TRL #1 LAKE WORTH, FL 33463 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: WILFRID JEAN 04/17/2024

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGRM

Name JEAN, WILFRID

Address 7136 SOUTH MILITARY TRL #1

City-State-Zip: LAKE WORTH FL 33463

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: JEAN, WILFRID

MANAGER

04/17/2024

FILED Apr 17, 2024

Secretary of State

0092260792CC

Date