

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000037832

Entity Name: EQUINE INSURANCE SPECIALISTS, LLC

Current Principal Place of Business:

15620 CEDAR GROVE LANE
WELLINGTON, FL 33414

Current Mailing Address:

15620 CEDAR GROVE LANE
WELLINGTON, FL 33414 US

FEI Number: 47-1658021

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
3458 LAKESHORE DRIVE
TALLAHASSEE, FL 32312 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: ANDREW BEAUCHAMP

04/03/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MEMBER	Title	MEMBER
Name	BEAUCHAMP, ANDREW	Name	BEAUCHAMP, EVAN
Address	15620 CEDAR GROVE LANE	Address	3040 SANDERSVILLE RD.
City-State-Zip:	WELLINGTON FL 33414	City-State-Zip:	LEXINGTON KY 40511

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: EVAN BEAUCHAMP

MEMBER

04/03/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date