

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000149949

Entity Name: BEACON INSURANCE AGENCY, LLC

Current Principal Place of Business:

10101 W SAMPLE RD
SUITE 436
CORAL SPRINGS, FL 33065

Current Mailing Address:

10101 W SAMPLE RD
SUITE 436
CORAL SPRINGS, FL 33065 US

FEI Number: 47-1929608

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAINES, KIESHA
10101 W SAMPLE RD
SUITE 436
CORAL SPRINGS, FL 33065 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	AMBR
Name	CAINES, KIESHA	Name	CAINES, RAYANTHONY
Address	10101 W SAMPLE RD SUITE 436	Address	10101 W SAMPLE RD SUITE 436
City-State-Zip:	CORAL SPRINGS FL 33065	City-State-Zip:	CORAL SPRINGS FL 33065

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: KIESHA CAINES

PRESIDENT

01/31/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date