2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000193881

Entity Name: MILLENNIAL SPECIALTY INSURANCE, LLC

FILED
Apr 13, 2024
Secretary of State
6123482487CC

Current Principal Place of Business:

4211 W. BOY SCOUT BLVD, SUITE 800

TAMPA, FL 33607

Current Mailing Address:

4211 W. BOY SCOUT BLVD, SUITE 800 TAMPA, FL 33607 US

FEI Number: 47-2619385 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC. 801 US HWY 1 NORTH PALM BEACH, FL 33408 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: JON-MICHAEL SANCHEZ, SPECIAL SECRETARY

04/13/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CHAIRMAN Title CEO

Name BALDWIN, L. LOWRY Name BALDWIN, TREVOR

Address 4211 W. BOY SCOUT BLVD, SUITE 800 Address 4211 W. BOY SCOUT BLVD, SUITE 800

City-State-Zip: TAMPA FL 33607 City-State-Zip: TAMPA FL 33607

Title PRESIDENT Title CFO

Name ROCHE, JIM Name WIEBECK, KRIS

Address 4211 W. BOY SCOUT BLVD, SUITE 800 Address 4211 W. BOY SCOUT BLVD, SUITE 800

City-State-Zip: TAMPA FL 33607 City-State-Zip: TAMPA FL 33607

Title COO Title VP

Name GALBRAITH, DAN Name STEPHENS, CHRIS

Address 4211 W. BOY SCOUT BLVD, SUITE 800 Address 4211 W. BOY SCOUT BLVD, SUITE 800

City-State-Zip: TAMPA FL 33607 City-State-Zip: TAMPA FL 33607

Title PRESIDENT Title MANAGER

Name SCHULTZ, BRIAN Name LLC, BRP INSURANCE

INTERMEDIARY HOLDINGS,

Address 4211 W. BOY SCOUT BLVD, SUITE 800
Address 4211 W. BOY SCOUT BLVD, SUITE 800
Address 4211 W. BOY SCOUT BLVD, SUITE 800

City-State-Zip: TAMPA FL 33607

City-State-Zip: TAMPA FL 33607

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: BRP INSURANCE INTERMEDIARY HOLDINGS, LLC

MANAGER, BY JON-MICHAEL SANCHEZ, ATTORNEY-IN-FACT 04/13/2024