

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000148499

Entity Name: 305 INSURANCE GROUP LLC

Current Principal Place of Business:

429 LENOX AVE
MIAMI, FL 33139

Current Mailing Address:

429 LENOX AVE
MIAMI, FL 33139 US

FEI Number: 32-0474253

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATALIA LARA PA
19224 NW 23 PL
PEMBROKE PINES, FL 33029 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: NATALIA LARA

04/26/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name AWAK, ANTONIO
Address 429 LENOX AVE
City-State-Zip: MIAMI FL 33139

Title MGRM
Name QUINTERO, ANDREINA
Address 429 LENOX AVE
City-State-Zip: MIAMI FL 33139

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: ANTONIO AWAK

MGRM

04/26/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date