

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000148930

Entity Name: CHOSEN INSURANCE AGENCY, LLC

Current Principal Place of Business:

4800 S.W. 64TH AVENUE
105C
DAVIE, FL 33314

Current Mailing Address:

4301 S. FLAMINGO RD SUITE #106
-174
DAVIE, FL 33330 US

FEI Number: 47-5017109

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BYNUM, LUCRETIA D
4800 S.W. 64TH AVENUE
105C
DAVIE, FL 33314 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 PRINCIPAL
Name BYNUM, LUCRETIA
Address 4800 S.W. 64TH AVENUE
 105C
City-State-Zip: DAVIE FL 33314

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: LUCRETIA BYNUM

**PRINCIPAL AGENT/
OWNER**

04/28/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date