

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000144933

**Entity Name:** INTEGRITY INSURANCE UNDERWRITERS L.L.C.

**Current Principal Place of Business:**

8130 GLADES RD #223  
BOCA RATON, FL 33434

**Current Mailing Address:**

8130 GLADES RD #223  
BOCA RATON, FL 33434 US

**FEI Number:** 81-3434336

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

ZACAPA FUNEZ, MARTHA NICOLE  
8130 GLADES RD #223  
BOCA RATON, FL 33434 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:** MARTHA ZACAPA FUNEZ

01/08/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ZACAPA FUNEZ, MARTHA NICOLE  
Address 8130 GLADES RD PMB 223  
City-State-Zip: BOCA RATON FL 33434

Title CFO  
Name BONTEMPS, MADISON N  
Address 8130 GLADES RD #223  
City-State-Zip: BOCA RATON FL 33434

*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:** MARTHA NICOLE ZACAPA FUNEZ

MGR

01/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date