

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000171320

**Entity Name:** EXPRESS LINE INSURANCE, LLC

**Current Principal Place of Business:**

3900 W COMMERCIAL BLVD  
SUITE 234  
TAMARAC, FL 33309

**Current Mailing Address:**

3900 W COMMERCIAL BLVD.  
SUITE 234  
TAMARAC, FL 33309 US

**FEI Number:** 81-3838093

**Certificate of Status Desired:** No

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

VALCIN, DANIEL  
4340 NW 60TH STREET  
FORT LAUDERDALE, FL 33319 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            PRESIDENT  
Name            VALCIN, DANIEL  
Address        4340 NW 60TH STREET  
City-State-Zip: FORT LAUDERDALE FL 33319

*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:** DANIEL VALCIN

**PRESIDENT**

**04/14/2025**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date