

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000208038

Entity Name: TMW INSURANCE AGENCY, LLC

Current Principal Place of Business:

5229 HESSEL COURT
ROCKLEDGE, FL 32955

Current Mailing Address:

5229 HESSEL COURT
ROCKLEDGE, FL 32955 US

FEI Number: 81-4429433

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WATKINS, DENNIS
5229 HESSEL COURT
ROCKLEDGE, FL 32955 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 MGR

Name WATKINS, DENNIS

Address 5229 HESSEL COURT

City-State-Zip: ROCKLEDGE FL 32955

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: DENNIS WATKINS

MGR

01/28/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date