

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000041696

Entity Name: LAUREATE INSURANCE PARTNERS, LLC

Current Principal Place of Business:

4211 W. BOY SCOUT BLVD
SUITE 800
TAMPA, FL 33607

Current Mailing Address:

4211 W. BOY SCOUT BLVD
SUITE 800
TAMPA, FL 33607 US

FEI Number: 81-5475339

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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 MANAGER
Name BRP MAIN STREET INSURANCE
 HOLDINGS, LLC
Address 4211 W. BOY SCOUT BLVD
 SUITE 800
City-State-Zip: TAMPA FL 33607

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: BRP MAIN STREET INSURANCE HOLDINGS, LLC

MANAGER, BY SAVANAH 03/29/2023
STRYDOM, ATTORNEY-
IN-FACT

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date