

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000048328

**Entity Name:** JOSE O ROSARIO INSURANCE AGENCY LLC

**Current Principal Place of Business:**

10249 S. JOHN YOUNG PARKWAY  
UNIT 110  
ORLANDO, FL 32837

**Current Mailing Address:**

10249 S. JOHN YOUNG PARKWAY  
UNIT 110  
ORLANDO, FL 32837 US

**FEI Number:** 82-0703291

**Certificate of Status Desired:** No

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

ROSARIO, JOSE O  
10249 S. JOHN YOUNG PARKWAY  
UNIT 110  
ORLANDO, FL 32837 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            AMBR  
Name            ROSARIO, JOSE O  
Address        10249 S. JOHN YOUNG PARKWAY  
                  UNIT 110  
City-State-Zip: ORLANDO FL 32837

*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:** JOSE O ROSARIO

AMBR

04/26/2021

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

\_\_\_\_\_  
Date