

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000100634

**Entity Name:** LUIS GUIA SMART INSURANCE. LLC

**Current Principal Place of Business:**

8208 NW 59TH PL  
TAMARAC, FL 33321

**Current Mailing Address:**

8208 NW 59TH PL  
TAMARAC, FL 33321

**FEI Number:** 83-4146593

**Certificate of Status Desired:** No

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

GUIA, LUIS  
8208 NW 59TH PL  
TAMARAC, FL 33321 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	Title	AR
Name	GUIA, LUIS	Name	GUIA, MARISA R
Address	8208 NW 59TH PL	Address	8208 NW 59TH PL
City-State-Zip:	TAMARAC FL 33321	City-State-Zip:	TAMARAC FL 33321

*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:** GUIA, LUIS

P

04/04/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date