

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000034576

Entity Name: CTB INSURANCE LLC

Current Principal Place of Business:

7100 W. CAMINO REAL SUITE 302-3
BOCA RATON, FL 33433

Current Mailing Address:

7100 W. CAMINO REAL SUITE 302-3
BOCA RATON, FL 33433 US

FEI Number: 83-3758151

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOBADILLA, CLAUDIA T
7100 W. CAMINO REAL SUITE 302-3
BOCA RATON, FL 33433 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 BOBADILLA, CLAUDIA T
Address 7100 W. CAMINO REAL SUITE 302-3
City-State-Zip: BOCA RATON FL 33433

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: CLAUDIA BOBADILLA

MANAGING MEMBER

03/02/2022

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date