

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000078340

Entity Name: AMERIC INSURANCE SERVICES, LLC

Current Principal Place of Business:

1112 S NOVA RD
ORMOND BEACH, FL 32174

Current Mailing Address:

1112 S NOVA RD
ORMOND BEACH, FL 32174 UN

FEI Number: 83-4285731

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WESTON, AMANDA E
1112 S NOVA RD
ORMOND BEACH, FL 32174 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: AMANDA E WESTON

02/19/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name WESTON, AMANDA E
Address 1112 S NOVA RD
City-State-Zip: ORMOND BEACH FL 32174

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: AMANDA WESTON

MGR

02/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date