

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000120008

Entity Name: NAG INSURANCE AGENCY LLC

Current Principal Place of Business:

6316 SAN JUAN AVE
10
JACKSONVILLE, FL 32210

Current Mailing Address:

3841 EVAN SAMUEL DR
JACKSONVILLE, FL 32210 US

FEI Number: 84-1747624

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BARTHELEMY, GUIRAUD
3841 EVAN SAMUEL DR
JACKSONVILLE, FL 32210 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
Name BARTHELEMY, GUIRAUD
Address 3841 EVAN SAMUEL DR
City-State-Zip: JACKSONVILLE FL 32210

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: GUIRAUD BARTHELEMY

OWNER

04/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date