

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000144007

Entity Name: BPSINSURANCE LLC

Current Principal Place of Business:

733 NW 208TH TERRACE
PEMBROKE PINES, FL 33029

Current Mailing Address:

733 NW 208TH TERRACE
PEMBROKE PINES, FL 33029 US

FEI Number: 84-3511535

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARIAS CONSULTING & SERVICES CORP
5201 WATERFORD DISTRICT DR
SUITE 813
MIAMI, FL 33126 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 FLORES ACEVEDO, BELEN
Address 733 NW 208TH TERRACE
City-State-Zip: PEMBROKE PINES FL 33029

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: FLORES ACEVEDO , BELEN

MGR

04/28/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date