

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000158995

Entity Name: ALXA INSURANCE LLC

Current Principal Place of Business:

212 SILVER REEF LN
ST AUGUSTINE, FL 32095

Current Mailing Address:

212 SILVER REEF LN
ST AUGUSTINE, FL 32095 US

FEI Number: 84-2245445

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERNANDEZ, DIANED
212 SILVER REEF LN
ST AUGUSTINE, FL 32095 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	MANAGER
Name	FERNANDEZ, DIANED	Name	MARTINEZ LORENZO, JUAN CARLOS
Address	212 SILVER REEF LN	Address	212 SILVER REEF LN
City-State-Zip:	ST AUGUSTINE FL 32095	City-State-Zip:	ST AUGUSTINE FL 32095

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: JUAN CARLOS MARTINEZ LORENZO

MANAGER

01/25/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date