

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000239934

Entity Name: WHITE COAT INSURANCE GROUP, LLC

Current Principal Place of Business:

13340 WEST COLONIAL DRIVE SUITE 250
WINTER GARDEN, FL 34787

Current Mailing Address:

13340 WEST COLONIAL DRIVE SUITE 250
WINTER GARDEN, FL 34787 US

FEI Number: 84-3284591

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORTHWEST REGISTERED AGENT LLC
7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702 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 TRAWINSKI, NICHOLAS
Address 13340 WEST COLONIAL DRIVE SUITE
250
City-State-Zip: WINTER GARDEN FL 34787

Title AMBR
Name TRAWINSKI, SARAH
Address 13340 WEST COLONIAL DRIVE SUITE
250
City-State-Zip: WINTER GARDEN FL 34787

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: NICHOLAS TRAWINSKI

MEMBER

04/06/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date