

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000247612

Entity Name: VERAFY INSURANCE, LLC

Current Principal Place of Business:

1111 NE 25TH PLACE
OCALA, FL 34470

Current Mailing Address:

1111 NE 25TH PLACE
OCALA, FL 34470 US

FEI Number: 84-3350080

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VERA, DANIEL H
4170 SE 65TH PL
OCALA, FL 34480 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 VERA, DANIEL H
Address 4170 SE 65TH PLACE
City-State-Zip: Ocala FL 34480

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: DANIEL VERA

OWNER

03/17/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date