

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000281181

Entity Name: CORCIA INSURANCE GROUP LLC

Current Principal Place of Business:

2805 WEST BUSCH BLVD
SUITE 111
TAMPA, FL 33618

Current Mailing Address:

2070 NE 207TH STREET
MIAMI, FL 33179 US

FEI Number: 84-4159984

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEMON, CARLOS D. ESQ.
2611 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020 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 CORCIA, SANDRA
Address 2070 NE 207TH STREET
City-State-Zip: MIAMI FL 33179

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: SANDRA CORCIA

PRESIDENT

03/20/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date