

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000300526

**Entity Name:** BMG DIVINE INSURANCE AGENCY LLC

**Current Principal Place of Business:**

9710 STIRLING ROAD - STE. 108  
COOPER CITY, FL 33024

**Current Mailing Address:**

9710 STIRLING ROAD - STE. 108  
COOPER CITY, FL 33024

**FEI Number:** 84-4197424

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GARCIA, BELKIS M  
2010 NW 100 AVE  
PEMBROKE PINES, FL 33024 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	AMBR
Name	GARCIA, BELKIS M	Name	PIMENTEL, LISBETH
Address	2010 NW 100 AVE	Address	1880 SW 118 AVE
City-State-Zip:	PEMBROKE PINES FL 33024	City-State-Zip:	MIRAMAR FL 33025

*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:** BELKIS M GARCIA

**OWNER**

**01/20/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date