

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000019740

Entity Name: CRUZ INSURANCE GROUP LLC

Current Principal Place of Business:

11528 PURPLE LILAC CIRCLE
ORLANDO, FL 32837

Current Mailing Address:

11528 PURPLE LILAC CIRCLE
ORLANDO, FL 32837

FEI Number: 84-4576764

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRUZ, SHEILA Y
11528 PURPLE LILAC CIRCLE
ORLANDO, FL 32837 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 PRESIDENT, MANAGER
Name CRUZ, SHEILA
Address 11528 PURPLE LILAC CIRCLE
City-State-Zip: ORLANDO FL 32837

Title VP, MANAGER
Name CRUZ, YAIMA
Address 11528 PURPLE LILAC CIRCLE
City-State-Zip: ORLANDO FL 32837

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: SHEILA CRUZ

P

01/29/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date