2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000259928

Entity Name: LEGACY RE GROUP, LLC

Current Principal Place of Business:

5071 WILLOW POND ROAD W WEST PALM BEACH, FL 33417

Current Mailing Address:

5071 WILLOW POND ROAD W WEST PALM BEACH, FL 33417 US

FEI Number: 85-2842938 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PHILIPPE GEORGES 5071 WILLOW POND ROAD W WEST PALM BEACH, FL 33417 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 Title AMBR

Name BILLY JACQUES GIRA Name CHRISTOPHER CLAYTON SEVILLE

Address 6760 HERITAGE GRADE, UNIT 108 Address 4561 TARA COVE WAY

City-State-Zip: BOYNTON BEACH FL 33437 City-State-Zip: WEST PALM BEACH FL 33417

Title AMBR Title AMBR

Name EMMANUEL GEORGES Name ENOL PIERRE GILLES

Address 4195 TURNBERRY CIRCLE, APT 802 Address 4208 SHELLEY ROAD NORTH
City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: WEST PALM BEACH FL 33407

Title AMBR Title AMBR

Name MARC AGNEAU GEORGES Name PHILIPPE GEORGES

Address 3710 N JOG RD, APT 202 Address 5071 WILLOW POND ROAD W

City-State-Zip: WEST PALM BEACH FL 33411 City-State-Zip: WEST PALM BEACH FL 33417

Title AMBR

Name SHELDON EDWARDS

Address 1331 SW EDINBURGH DR
City-State-Zip: PORT ST. LUCIE FL 34953

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: MARC GEORGES AMBR 03/21/2022

FILED Mar 21, 2022

Secretary of State

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