## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000289893

Entity Name: INSURANCE PARTNERS OF FLORIDA LLC

Current Principal Place of Business:

433 PLAZA REAL

275

BOCA RATON, FL 33432

**Current Mailing Address:** 

3840 E. LAKE ESTATES DR DAVIE, FL 33328 US

FEI Number: 85-4202068 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HELFMAN, DAVID 3840 E. LAKE ESTATES DR DAVIE, FL 33328 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: DAVID HELFMAN 03/31/2023

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title AMBR

Name HELFMAN, DAVID

Address 3840 E. LAKE ESTATES DR

City-State-Zip: DAVIE FL 33328

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: DAVID HELFMAN

AGENCY OWNER 03/31/2023

FILED Mar 31, 2023

**Secretary of State** 

6151342861CC

Date