2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 21, 2025
Secretary of State
7334177442CC

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Entity Name: BOHN INSURANCE GROUP LLC

Current Principal Place of Business:

4706 CHIQUITA BLVD
SUITE 200-W-06
CAPE CORAL, FL 33914

Current Mailing Address:

4706 CHIQUITA BLVD
SUITE 200-W-06
CAPE CORAL, FL 33914 US

FEI Number: 85-3773649

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOHN, PHILIP
3804 SW 20TH AVE
CAPE CORAL, FL 33914 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	BOHN, PHILIP
Address	4706 CHIQUITA BLVD SUITE 200-W-06
City-State-Zip:	CAPE CORAL FL 33914

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: PHILIP BOHN OWNER 01/21/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date