

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000335784

**Entity Name:** ELITUS INSURANCE LLC

**Current Principal Place of Business:**

4687 NE 18TH AVE  
OAKLAND PARK, FL 33334

**Current Mailing Address:**

4687 NE 18TH AVE  
OAKLAND PARK, FL 33334

**FEI Number: 86-1476308**

**Certificate of Status Desired: Yes**

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

LAMORU, ERICK M  
4687 NE 18TH AVE  
OAKLAND PARK, FL 33334 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	AR
Name	LAMORU, ERICK M	Name	LAMORU, ERICK M
Address	4687 NE 18TH AVE	Address	4687 NE 18TH AVE
City-State-Zip:	OAKLAND PARK FL 33334	City-State-Zip:	OAKLAND PARK FL 33334

*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: ERICK M LAMORU**

**GENERAL MANAGER**

**08/02/2021**

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

\_\_\_\_\_  
Date