## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000105507

Entity Name: PROPER INSURANCE ADVISORS, LLC

**Current Principal Place of Business:** 

3233 THOMASVILLE ROAD TALLAHASSEE. FL 32308

**Current Mailing Address:** 

3233 THOMASVILLE ROAD TALLAHASSEE. FL 32308 US

FEI Number: 86-2412701 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PROPER LAW 3233 THOMASVILLE ROAD TALLAHASSEE, FL 32308 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: ERIC S HAUG 02/27/2024

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title MGR

Name GRULICH, DAVID Name CHASON, NICHOLAS

Address 3233 THOMASVILLE ROAD Address 3233 THOMASVILLE ROAD

City-State-Zip: TALLAHASSEE FL 32308 City-State-Zip: TALLAHASSEE FL 32308

Title MGR

Name HURLEY, PATRICK

Address 3233 THOMASVILLE ROAD
City-State-Zip: TALLAHASSEE FL 32308

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: DAVID GRULICH MANAGER

FILED Feb 27, 2024

**Secretary of State** 

1914177693CC

Date