

**2023 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L21000162367

**Entity Name:** DANTA INSURANCE SERVICES LLC

**Current Principal Place of Business:**

25 NORTH MARKET ST 253  
JACKSONVILLE, FL 32202

**Current Mailing Address:**

25 NORTH MARKET ST 253  
JACKSONVILLE, FL 32202 US

**FEI Number:** 86-3328643

**Certificate of Status Desired:** No

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

PONCE, TANIA  
25 NORTH MARKET ST 253  
JACKSONVILLE, FL 32202 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:** TANIA PONCE

10/19/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR, PRESIDENT  
Name PONCE, TANIA  
Address 25 NORTH MARKET ST 253  
City-State-Zip: JACKSONVILLE FL 32202

Title MGR  
Name SANCHEZ, DANIEL  
Address 25 NORTH MARKET ST 253  
City-State-Zip: JACKSONVILLE FL 32202

Title CFO  
Name ZAYAS, OMAR ANGEL  
Address 25 NORTH MARKET ST 253  
City-State-Zip: JACKSONVILLE FL 32202

*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:** TANIA PONCE

PRESIDENT

10/19/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date