2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
May 07, 2024
Secretary of State
8574176282CC

DOCUMENT# L21000171652

Entity Name: MANGAR INSURANCE LLC

Current Principal Place of Business:

6337 COUNTY ROAD 579
104
SEFFNER, FL 33584

Current Mailing Address:

P.O BOX 2063
SEFFNER, FL 33583 US

FEI Number: 86-3390929

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, WILSON
6337 COUNTY ROAD 579
104
SEFFNER, FL 33584 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: WILSON GARCIA 05/07/2024

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	MANZELLA, GIUSEPPE R	Name	GARCIA, WILSON
Address	6337 COUNTY ROAD 579 104	Address	6337 COUNTY ROAD 579 104
City-State-Zip:	SEFFNER FL 33584	City-State-Zip:	SEFFNER FL 33584
Title	MGR	Title	MGR
Name	GARCIA, ZAVIER	Name	FUSCHINI, JUDY
Address	6337 COUNTY ROAD 579 104	Address	6337 COUNTY ROAD 579 104
City-State-Zip:	SEFFNER FL 33584	City-State-Zip:	SEFFNER FL 33584

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: WILSON GARCIA MGR 05/07/2024

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