2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000259495

Entity Name: JIMENEZ INSURANCE LLC

Current Principal Place of Business:

9553 TOCOBAGA PL RIVERVIEW. FL 33578

Current Mailing Address:

9553 TOCOBAGA PL RIVERVIEW. FL 33578 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JIMENEZ HERNANDEZ, ARACELYS M 9553 TOCOBAGA PL RIVERVIEW, FL 33578 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: ARACELYS M JIMENEZ HERNANDEZ 04/25/2024

Electronic Signature of Registered Agent

Date

FILED Apr 25, 2024

Secretary of State

5184918985CC

Authorized Person(s) Detail:

Title MGRM Title MGR

Name JIMENEZ HERNANDEZ, ARACELYS M Name QUINTERO JIMENEZ, LAURA V

Address 9553 TOCOBAGA PL Address 9553 TOCOBAGA PL
City-State-Zip: RIVERVIEW FL 33578 City-State-Zip: RIVERVIEW FL 33578

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: ARACELYS M JIMENEZ HERNANDEZ

MGRM

04/25/2024