

2024 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L21000264386

Entity Name: ISA ANEZ INSURANCE LLC

Current Principal Place of Business:

15656 PORTER RD
KISSIMMEE, FL 34787

Current Mailing Address:

15656 PORTER RD
KISSIMMEE, FL 34787 US

FEI Number: 87-1107471

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANEZ DIAZ, ISABEL
15656 PORTER RD
KISSIMMEE, FL 34787 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: ISABEL ANEZ DIAZ

03/27/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name ANEZ DIAZ, ISABEL
Address 15656 PORTER RD
City-State-Zip: KISSIMMEE FL 34787

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: ISABEL ANEZ DIAZ

AMBR

03/27/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date