

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000377931

Entity Name: SMF INSURANCE, LLC

Current Principal Place of Business:

220 SE 2ND ST
APT 1707
FORT LAUDERDALE, FL 33301

Current Mailing Address:

220 SE 2ND ST
APT 1707
FORT LAUDERDALE, FL 33301

FEI Number: 87-2379886

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FREEDMAN, SAMANTHA M
220 SE 2ND ST
APT 1707
FORT LAUDERDALE, FL 33301 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name FREEDMAN, SAMANTHA M
Address 220 SE 2ND ST APT 1707
City-State-Zip: FORT LAUDERDALE FL 33301

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: SAMANTHA FREEDMAN

04/25/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date