

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000445608

Entity Name: BLUE PADDLE INSURANCE AGENCY, LLC

Current Principal Place of Business:

11161 STATE ROAD 70 E
UNIT 110 PMB 658
LAKEWOOD RANCH, FL 34202

Current Mailing Address:

11161 STATE ROAD 70 E
UNIT 110 PMB 658
LAKEWOOD RANCH, FL 34202 US

FEI Number: 84-3812170

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZAGORSKI, CANDICE
11230 RANCH CREEK TERRACE
#411
BRADENTON, FL 34211 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: CANDICE ZAGORSKI

02/06/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	AMBR
Name	CARRUTH, ROBERT M	Name	AWAD, MARK
Address	1025 WEST TURNPIKE AVENUE #101	Address	517 BLUFF ROAD
City-State-Zip:	BISMARCK ND 58501	City-State-Zip:	FORT LEE NJ 07024

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: ROBERT CARRUTH

OWNER

02/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date