

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000456156

Entity Name: WEST BRICKELL INSURANCE LLC

Current Principal Place of Business:

2350 W FLAGLER ST
MIAMI, FL 33135

Current Mailing Address:

201 ALHAMBRA CIRCLE, SUITE 501
CORAL GABLES, FL 33134 US

FEI Number: 87-3213745

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BALOYRA LAW
201 ALHAMBRA CIRCLE
501
CORAL GABLES, FL 33134 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 MGR
Name RAMIREZ, GUILLERMO
Address 2350 W FLAGLER ST
City-State-Zip: MIAMI FL 33135

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: GUILLERMO RAMIREZ

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01/24/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date