

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000529500

**Entity Name:** P.C.M. WEALTH & INSURANCE LLC

**Current Principal Place of Business:**

4200 SUMMIT CREEK BLVD.  
APT 9210  
ORLANDO, FL 32837

**Current Mailing Address:**

4200 SUMMIT CREEK BLVD.  
APT 9210  
ORLANDO, FL 32837 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

QUEZADA, JULIAN H  
4200 SUMMIT CREEK BLVD.  
APT 9210  
ORLANDO, FL 32837 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:** JULIAN H QUEZADA

04/07/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name PEROZA, OSMARY J  
Address 4200 SUMMIT CREEK BLVD. APT 9210  
City-State-Zip: ORLANDO FL 32837

*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:** OSMARY J PEROZA

MGR

04/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date