

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000068771

Entity Name: COVERAGE YOU DESERVE LLC

Current Principal Place of Business:

301 DAYLILY ROAD
CANTONMENT, FL 32533

Current Mailing Address:

301 DAYLILY ROAD
CANTONMENT, FL 32533

FEI Number: 86-1391360

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHNSON, MELODY
301 DAYLILY ROAD
CANTONMENT, FL 32533 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	Title	SEC
Name	JOHNSON, MELODY	Name	JOHNSON, MELODY
Address	301 DAYLILY ROAD	Address	301 DAYLILY ROAD
City-State-Zip:	CANTONMENT FL 32533	City-State-Zip:	CANTONMENT FL 32533

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: MELODY JOHNSON

MANAGING MEMBER

04/04/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date