## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000495395

Entity Name: INSURANCE WORKS AGENCY LLC

### **Current Principal Place of Business:**

2100 NW 74TH AVE SUNRISE, FL 33313

# **Current Mailing Address:**

2100 NW 74TH AVE SUNRISE, FL 33313 UN

# FEI Number: 93-4167438

### Name and Address of Current Registered Agent:

SAKOFF, NICHOLAS S 2100 NW 74TH AVE SUNRISE, FL 33313 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

## Authorized Person(s) Detail :

Title	CEO	Title	CEO
Name	SAKOFF, NICHOLAS S	Name	SERVICE, MARC
Address	2100 NW 74TH AVE	Address	5712 NW 73RD AVE
City-State-Zip:	SUNRISE 33313	City-State-Zip:	TAMARAC FL 33321

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: NICHOLAS SAKOFF

CEO

02/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 08, 2024 Secretary of State 6670069539CC

Date

Certificate of Status Desired: No