

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000508460

Entity Name: NESKA INSURANCE GROUP LLC

Current Principal Place of Business:

5415 OHIO AVE
SANFORD, FL 32771

Current Mailing Address:

5415 OHIO AVE
SANFORD, FL 32771 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BETANCOURT MARIN, NESKA
5415 OHIO AVE
SANFORD, FL 32771 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: BETANCOURT MARIN NESKA

03/11/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name BETANCOURT MARIN, NESKA
Address 5415 OHIO AVE
City-State-Zip: SANFORD FL 32771

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: NESKA BETANCOURT MARIN

MGR

03/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date