

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000117292

Entity Name: TREVISO INSURANCE LLC

Current Principal Place of Business:

9370 SW 8TH ST 420
BOCA RATON, FL 33428

Current Mailing Address:

9370 SW 8TH ST 420
BOCA RATON, FL 33428 US

FEI Number: 99-1937981

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GIORDANA, SARTOR
9370 SW 8TH ST 420
BOCA RATON, FL 33428 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: GIORDANA SARTOR

03/26/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name SARTOR, GIORDANA
Address 9370 SW 8TH ST 420
City-State-Zip: BOCA RATON FL 33064

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: GIORDANA SARTOR

AMBR

03/26/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date