## **2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M16000005784

Entity Name: HOLMAN INSURANCE SERVICES, LLC

**Current Principal Place of Business:** 

444 KINGS HIGHWAY MAPLE SHADE. NJ 08052

**Current Mailing Address:** 

444 KINGS HIGHWAY MAPLE SHADE. NJ 08052 US

FEI Number: 81-1085620 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYES STREET TALLAHASSEE, FL 32301 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: KIM LEONARD. ASSISTANT SECRETARY 04/28/2021

Electronic Signature of Registered Agent

Date

FILED Apr 28, 2021

**Secretary of State** 

9220794922CC

Authorized Person(s) Detail:

TitleMEMBERTitleAUTHORIZED PERSONNameHOLMAN ENTERPRISES, INC.NameMULLIN, KATHERINE AAddress244 EAST KINGS HIGHWAYAddress4001 LEADENHALL ROADCity-State-Zip:MAPLE SHADE NJ 08052City-State-Zip:MT LAUREL NJ 08054

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: KATHERINE A. MULLIN

**AUTHORIZED PERSON** 

04/28/2021