

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000011682

Entity Name: LEMONADE LIFE INSURANCE AGENCY, LLC

Current Principal Place of Business:

3080 N. CIVIC CENTER PLAZA
SCOTTSDALE, AZ 85251

Current Mailing Address:

5 CROSBY STREET
FLOOR 3
NEW YORK, NY 10013 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES, INC
3458 LAKESHORE DRIVE
TALLAHASSEE , FL 32312 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 MBR
Name LEMONADE, INC.
Address 5 CROSBY STREET, FLOOR 3
City-State-Zip: NEW YORK NY 10013

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: SCOTT FISCHER

AUTHORIZED PERSON

03/15/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date