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	AMBR	Title	AMBR
Name	HERNANDEZ, NELSON SR.	Name	HERNANDEZ, ANA J
Address	3807 SW 165 TER	Address	3807 SW 165 TER
City-State-Zip:	MIRAMAR FL 32027	City-State-Zip:	MIRAMAR FL 33027

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: NELSON HERNANDEZ SR

Electronic Signature of Signing Authorized Person(s) Detail

AMBR

### 04/04/2023

Date

# 2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

# Entity Name: INVICTUS INSURANCE LLC

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

3807 SW 165 TER MIRAMAR, FL 33027

# **Current Mailing Address:**

DOCUMENT# L21000269719

3807 SW 165 TER MIRAMAR, FL 33027 US

## FEI Number: 87-1841368

## Name and Address of Current Registered Agent:

HERNANDEZ, NELSON 3807 SW 165 TER MIRAMAR, FL 32027 US

FILED Apr 04, 2023 Secretary of State 0788198868CC

Date

Certificate of Status Desired: No