## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000406163

Entity Name: EPITOME INSURANCE ADVISORS LLC

**Current Principal Place of Business:** 

3612 RONDA DRIVE DELTONA. FL 32738

**Current Mailing Address:** 

3612 RONDA DRIVE DELTONA, FL 32738 US

FEI Number: 87-2637352 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZENBUSINESS INC. 336 E. COLLEGE AVE. SUITE 301 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: KHADIJEH HEMMATI 03/20/2024

Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title AMBR

Name COFFY, ROSELEINE
Address 3612 RONDA DRIVE
City-State-Zip: DELTONA FL 32738

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: ROSELEINE COFFY MEMBER

Electronic Signature of Signing Authorized Person(s) Detail

03/20/2024

FILED Mar 20, 2024

**Secretary of State** 

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