2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000229760

Entity Name: KEYES COVERAGE, LLC

Current Principal Place of Business:

5900 N HIATUS RD TAMARAC, FL 33321

Current Mailing Address:

5900 HIATUS ROAD TAMARAC, FL 33321 US

FEI Number: 59-1678136 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 7901 4TH ST N SUITE 300 ST.PETERSBURG, FL 33702 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

FILED Mar 10, 2023

Secretary of State

7220494660CC

Authorized Person(s) Detail:

Title MANAGER Title MANAGER

NameKEYSTONE AGENCY PARTNERS LLCNameTURNER, JEFFREYAddress5900 N HIATUS RDAddress5900 N HIATUS RDCity-State-Zip:TAMARAC FL 33321City-State-Zip:TAMARAC FL 33321

Title MEMBER Title MEMBER

NameKEYSTONE AGENCY PARTNERS LLCNameMARSH, GREGORYAddress5900 N HIATUS RDAddress5900 N HIATUS RDCity-State-Zip:TAMARAC FL 33321City-State-Zip:TAMARAC FL 33321

Title MEMBER Title MEMBER

NameRAGNO, DAVIDNameKEYES, ZACHARYAddress5900 N HIATUS RDAddress5900 N HIATUS RDCity-State-Zip:TAMARAC FL 33321City-State-Zip:TAMARAC FL 33321

Title MEMBER
Name GARZON.

Name GARZON, RYAN
Address 5900 N HIATUS RD
City-State-Zip: TAMARAC FL 33321

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: JEFFREY TURNER

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER

03/10/2023

Date