

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000379096

Entity Name: TREASURE CHEST INSURANCE, LLC

Current Principal Place of Business:

3665 E BAY DR, SUITE 204, #249
LARGO, FL 33771

Current Mailing Address:

3665 E BAY DR, SUITE 204, #249
LARGO, FL 33771 US

FEI Number: 88-3997008

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLP RA SERVICES LLC
360 CENTRAL AV SUITE 800
SAINT PETERSBURG, FL 33701 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 MGR
Name JORGENSEN, CHRIS
Address 3665 E BAY DR, SUITE 204, #249
City-State-Zip: LARGO FL 33771

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: CHRIS JORGENSEN

PRESIDENT

04/29/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date