





STATE OF IDAHO

Office of the secretary of state, Phil McGrane ANNUAL REPORT

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$0.00 For Office Use Only

-FILED-

File #: 0005255947

Date

Date Filed: 6/1/2023 2:20:13 PM

Entity Name and Mailing Address:		AFFILIENT INCUDANCE PROCEAM LLO
Entity Name:		AFFLUENT INSURANCE PROGRAM, LLC
Foreign Name (name in home jurisdiction):		AFFLUENT INSURANCE PROGRAM, LLC
The file number of this entity on the records of the Idaho Secretary of State is: Address		0000204693
		2404 FLORIDA AVE WEST PALM BEACH, FL 33401-7866
Entity Details: Entity Status		Active-Existing
This entity is organized under the laws of:		FLORIDA
If applicable, the old file number of this entity on the records of		
the Idaho Secretary of State was:	his entity on the records	, OI - W04333
The registered agent on record is:		
Registered Agent		CORPORATE CREATIONS NETWORK INC
		Commercial Registered Agent Physical Address
		950 W BANNOCK ST #1100
		BOISE, ID 83702
		Mailing Address
		950 W BANNOCK ST #1100 BOISE, ID 83702
Agent or Address Change		
Select if you are appointing a ne	ew agent.	
Limited Liability Company Managers and Memb	bers	
Name	Title	Business Address
■ Bruce P. Gendelman	Manager	2404 FLORIDA AVE WEST PALM BEACH, FL 33401-7866
Joseph Gendelman	Member	2404 FLORIDA AVE WEST PALM BEACH, FL 33401-7866
The annual report must be signed by an author	rized eigner of the entity	
Job Title: Special Manager	ized signer of the entity.	
Andrew Gilbert		06/01/2023

Sign Here