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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: OLLMER, RENEE

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P96000049517 Entity Name: NACHO MAMA'S OF COLLIER COUNTY, INC.

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

599 S COLLIER BLVD., STE 201 MARCO ISLAND, FL 34145

Current Mailing Address:

599 S COLLIER BLVD., STE 210 MARCO ISLAND. FL 34145 US

FEI Number: 59-3492112

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

RAINONE, JAMES F 599 S COLLIER BLVD., STE 201 MARCO ISLAND, FL 34145 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:

Title

Title

Name Address

Name

Address

Officer/Director Detail : Ρ Title v RAINONE, JAMES F OLLMER, DIRK Name 30 CREST AVE 1768 GRANADA DR Address City-State-Zip: MARCO ISLAND FL 33145 NARRAGANSETT RI 02882 City-State-Zip: S OLLMER, RENEE 1768 GRANADA DR City-State-Zip: MARCO ISLAND FL 33145

S

Date

Certificate of Status Desired: No

02/08/2024 Date