

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000011753

**Entity Name:** O.R. BUSINESS CENTER, LLC**Current Principal Place of Business:**35 OCEAN REEF DRIVE, SUITE #200  
KEY LARGO, FL 33037**Current Mailing Address:**35 OCEAN REEF DRIVE, SUITE #200  
KEY LARGO, FL 33037 US**FEI Number:** 65-1042993**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPCO, INC  
901 PONCE DE LEON BLVD.  
10TH FLOOR  
CORAL GABLES, FL 33134 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:** ERICA L. ENGLISH

04/25/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                                 |
|-----------------|---------------------------------|
| Title           | VP                              |
| Name            | STEELE, RYAN                    |
| Address         | 35 OCEAN REEF DRIVE, SUITE #200 |
| City-State-Zip: | KEY LARGO FL 33037              |

|                 |                                 |
|-----------------|---------------------------------|
| Title           | PRESIDENT                       |
| Name            | TONARELLI, ALEX                 |
| Address         | 35 OCEAN REEF DRIVE, SUITE #200 |
| City-State-Zip: | KEY LARGO FL 33037              |

|                 |                                 |
|-----------------|---------------------------------|
| Title           | VP                              |
| Name            | O'KEEFFE, BRIAN                 |
| Address         | 35 OCEAN REEF DRIVE, SUITE #200 |
| City-State-Zip: | KEY LARGO FL 33037              |

*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:** ALEX TONARELLI

PRESIDENT

04/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date