SIGNATURE:	Electronic Signature of Registered Agent		Date
SIGNATURE:			
	JOHNSON W CAUTHEN		04/25/20
The above named e	ntity submits this statement for the purpose of changin	ng its registered office or	registered agent, or both, in the State of Florida.
CAUTHEN, JOHN 8096 MAIN ST BOKEELIA, FL 33			
Name and Ad	dress of Current Registered Agent:		
FEI Number: 77-0641882 Certifica			Certificate of Status Desired: No
8096 MAIN ST BOKEELIA, F			
Current Mailii	ng Address:		
BOKEELIA, FL 3	3922		

Authorized Person(s) Detail :					
Title	MGRM	Title	MGR		
Name	CAUTHEN, JOHNSON W	Name	O'DONNELL, ALBERT		
Address	PO BOX 1571	Address	4291 WILLIAMS RD		
City-State-Zip:	FT. MYERS FL 33902	City-State-Zip:	ESTERO FL 33928		
Title Name Address City-State-Zip:	MGR O'DONNELL, PATRICIA 4291 WILLIAMS RD ESTERO FL 33928				

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.

MGRM

SIGNATURE: JOHNSON W CAUTHEN

Electronic Signature of Signing Authorized Person(s) Detail

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## Entity Name: 3214 S.W. PINE ISLAND ROAD, L.L.C.

DOCUMENT# L04000051702

## **Current Principal Place of Business:**

8096 MAIN ST

04/25/2022

Date