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.

OWNER

SIGNATURE: ANDREW ISAAC

Electronic Signature of Signing Authorized Person(s) Detail

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

4 BAY DRIVE NE

FEI Number: 51-0520482

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

ISAAC, ANDREW D 4 BAY DRIVE NE FT WALTON BEACH, FL 32548 US

Certificate of Status Desired: Yes

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:

Authorized Person(s) Detail :			
Title	MGR	Title	AUTHORIZED REPRESENTATIN
Name	ISAAC, ANDREW D	Name	ISAAC, JULIE DAWN
Address	4 BAY DRIVE NE	Address	4 BAY DRIVE NE
City-Stat	te-Zip: FT WALTON BEACH FL 32548	City-State-Zip:	FT WALTON BEACH FL 32548

DOCUMENT# L04000058791

Entity Name: ISAAC ENTERPRISE LLC

Current Principal Place of Business:

4 BAY DRIVE NE FT WALTON BEACH, FL 32548

Current Mailing Address:

FT WALTON BEACH. FL 32548 US

04/13/2024

FILED Apr 13, 2024 Secretary of State 6609251573CC

Date

Date