

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000088085

**Entity Name:** 3 T.D.A., LLC

**Current Principal Place of Business:**

2709 KILLARNEY WAY  
SUITE 4  
TALLHASSEE, FL 32309

**Current Mailing Address:**

2709 KILLARNEY WAY  
SUITE 4  
TALLHASSEE, FL 32309 US

**FEI Number:** 13-4310621

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WINN-LARSON, MICHELLE S  
3322 AQUA RIDGE WAY  
TALLAHASSEE, FL 32309 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:** MICHELLE S. WINN-LARSON

04/05/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           WINN-LARSON, MICHELLE S  
Address        3322 AQUA RIDGE WAY  
City-State-Zip: TALLAHASSEE FL 32309

Title           AUTHORIZED MEMBER  
Name           SOKOL, LESLIE W  
Address        2615 MARSTON ROAD  
City-State-Zip: TALLAHASSEE FL 32308

Title           AUTHORIZED MEMBER  
Name           WINN, JASON D  
Address        2709 KILLARNEY WAY  
                  SUITE 4  
City-State-Zip: TALLAHASSEE FL 32309

*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:** MICHELLE WINN-LARSON

MANAGER

04/05/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date