

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000102051

Entity Name: PAPPAS DAUGHTERS, LLC**Current Principal Place of Business:**1109-A N DIXIE FREEWAY
NEW SMYRNA BEACH, FL 32168**Current Mailing Address:**P.O. BOX 1946
NEW SMYRNA BEACH, FL 32170 US**FEI Number:** 20-3764235**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PAPPAS, CHRIS J
1109-A N DIXIE FREEWAY
NEW SMYRNA BEACH, FL 32168 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:** CHRIS PAPPAS

02/22/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	PAPPAS, CHRIS
Address	1109-A N DIXIE FREEWAY
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	MGRM
Name	MATASSINI, CHRISTINA PAPPAS
Address	1109-A N DIXIE FREEWAY
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	AUTHORIZED MEMBER
Name	POLITIS, EFFIE PAPPAS
Address	1109-A N DIXIE FREEWAY
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	AUTHORIZED MEMBER
Name	ROOTH, FOTENE PAPPAS
Address	1109-A N DIXIE FREEWAY
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	MANAGER
Name	PAPPAS, SOULA
Address	P.O. BOX 1946
City-State-Zip:	NEW SMYRNA BEACH FL 32170

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: CHRISTINA PAPPAS MATASSINI

MANAGING MEMBER

02/22/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date