P.O. BOX 50 SALT SPRIN	006 NGS, FL 32134 US			
FEI Number: 59-3082301		Certificate of Status Desired: No		
Name and Address of Current Registered Agent:				
GREEN, TAMM 25238 NE 142N SALT SPRINGS				
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.				
The above name	d entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of Fi	lorida.
	d entity submits this statement for the purpose of changing its regise: TAMMY B. GREEN	stered office or regis	tered agent, or both, in the State of Fi	lorida. 04/19/2022
		stered office or regis	tered agent, or both, in the State of Fi	
SIGNATURE	E: TAMMY B. GREEN	stered office or regis	tered agent, or both, in the State of Fi	04/19/2022
SIGNATURE	E: TAMMY B. GREEN Electronic Signature of Registered Agent	stered office or regis	BOOKKEEPER	04/19/2022
SIGNATURE Authorized	TAMMY B. GREEN Electronic Signature of Registered Agent Person(s) Detail :			04/19/2022
SIGNATURE Authorized	E TAMMY B. GREEN Electronic Signature of Registered Agent Person(s) Detail : MGR	Title	BOOKKEEPER	04/19/2022

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: P. A. GREEN ENTERPRISES, LLC

Current Principal Place of Business:

25238 NE 142ND LANE SALT SPRINGS, FL 32134

Current Mailing Address:

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: PAUL A GREEN

PRESIDENT

04/19/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Apr 19, 2022 Secretary of State 1006173132CC