| FEI Number: 80-0445354<br>Name and Address of Current Registered Agent:  |  |                 | Certificate of Status Desired: No |            |
|--|--|-----------------|-----------------------------------|------------|
| REDL, IVA<br>REDL CONSULTING LLC<br>2198 MAIN ST.<br>SARASOTA, FL 34237-6024 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  | : IVA REDL                               |                 |                                   | 01/18/2024 |
|  | Electronic Signature of Registered Agent |                 |                                   | Date       |
| Authorized Person(s) Detail :  |  |                 |                                   |            |
| Title  | MGRM                                     | Title           | MGRM                              |            |
| Name   | BRZOBOHATY, TOMAS                        | Name            | BRZOBOHATA, PETRA                 |            |
| Address  | NAMESTI PRED BATERIEMI 1104/20           | Address         | NAMESTI PRED BATERIEMI 110        | 4/20       |
| City-State-Zip:  | PRAHA 6 16200                            | City-State-Zip: | PRAHA 6 16200                     |            |
|  |  |                 |                                   |            |
|  |  |                 |                                   |            |
|  |  |                 |                                   |            |
|  |  |                 |                                   |            |
|  |  |                 |                                   |            |

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: TOMAS BRZOBOHATY

MANAGING MEMBER

01/18/2024

Electronic Signature of Signing Authorized Person(s) Detail

# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000042183

Entity Name: LIDO KEY, LLC

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

160 WHITTIER DR SARASOTA, FL 34236

## **Current Mailing Address:**

P.O. BOX 2671 SARASOTA, FL 34230 US

FILED Jan 18, 2024 **Secretary of State** 2863855883CC

Date