

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000114095

**Entity Name:** TASTE @ 645 ATLANTIC LLC**Current Principal Place of Business:**1850 EMERSON ST.  
JACKSONVILLE , FL 32207**Current Mailing Address:**60 QUAIL LANE  
JACKSONVILLE BEACH, FL 32250 US**FEI Number:** 27-1433726**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**TERESA, BROWN  
60 QUAIL LANE  
JACKSONVILLE, FL 32250 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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM
Name	BROWN, TERESA L
Address	60 QUAIL LANE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	MGRM
Name	BURROUGHS, PHYLLIS
Address	60 QUAIL LANE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	MGRM
Name	RICCIARDELLI, ROBERT J
Address	60QUAIL LANE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

*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:** TERESA L. BROWN

MGRM

01/31/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date