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|---|--|-----------------------|--|-----------------------------------|
| 14318 MARLIN A | AVE | | | |
| PORT CHARLOT | ITE, FL 33953 | | | |
| | | | | |
| Current Maili | ing Address: | | | |
| 14318 MARLI | IN AVE | | | |
| PORT CHARI | LOTTE, FL 33953 US | | | |
| | | | | |
| FEI Number: 90-0544757 | | | Certificate of Status Desired: No | |
| Name and Address of Current Registered Agent: | | | | |
| | | | | |
| LEGENDRE, KA | - | | | |
| 14318 MARLIN A | AVE | | | |
| 14318 MARLIN A | - | | | |
| 14318 MARLIN A PORT CHARLOT | AVE | jistered office or re | gistered agent, or both, in the State of I | Florida. |
| 14318 MARLIN A PORT CHARLOT The above named o | AVE ITE, FL 33953 US | gistered office or re | gistered agent, or both, in the State of I | ^{=lorida.} 03/17/2021 |
| 14318 MARLIN A PORT CHARLOT The above named o | AVE ITE, FL 33953 US entity submits this statement for the purpose of changing its reg | vistered office or re | gistered agent, or both, in the State of I | |
| 14318 MARLIN A PORT CHARLOT The above named o SIGNATURE: | AVE ITE, FL 33953 US entity submits this statement for the purpose of changing its reg KATHERINE LEGENDRE | yistered office or re | gistered agent, or both, in the State of I | 03/17/2021 |
| 14318 MARLIN A PORT CHARLOT The above named of SIGNATURE: Authorized P | AVE ITE, FL 33953 US entity submits this statement for the purpose of changing its reg KATHERINE LEGENDRE Electronic Signature of Registered Agent | yistered office or re | gistered agent, or both, in the State of I | 03/17/2021 |
| 14318 MARLIN A PORT CHARLOT The above named of SIGNATURE: Authorized P Title | AVE ITE, FL 33953 US entity submits this statement for the purpose of changing its reg KATHERINE LEGENDRE Electronic Signature of Registered Agent Person(s) Detail : MGRM | Title | MGR | 03/17/2021 |
| 14318 MARLIN A PORT CHARLOT The above named of SIGNATURE: Authorized P Title Name | AVE ITTE, FL 33953 US entity submits this statement for the purpose of changing its reg KATHERINE LEGENDRE Electronic Signature of Registered Agent Person(s) Detail : | | | 03/17/2021 |

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: LEGENDRE, KATHERINE, S

MGRM

City-State-Zip: PORT CHARLOTTE FL 33953

03/17/2021

Electronic Signature of Signing Authorized Person(s) Detail

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000028582

Entity Name: SOUTHERN STYLE INVESTMENTS LLC

Current Principal Place of Business:

City-State-Zip: PORT CHARLOTTE FL 33953

FILED Mar 17, 2021 Secretary of State 1345321951CC

Date