

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000036697

**Entity Name:** VALET VIXENS PARKING LLC

**Current Principal Place of Business:**

1906 NORTH ARMENIA ST.  
SUITE 315  
TAMPA, FL 33607

**Current Mailing Address:**

1906 NORTH ARMENIA ST.  
SUITE 315  
TAMPA, FL 33607 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

HAVENS, THOMAS  
1906 N. AREMENIA AVE  
#121  
TAMPA, FL 33607 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:** THOMAS HAVENS

03/26/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                                    |                 |                                     |
|-----------------|------------------------------------|-----------------|-------------------------------------|
| Title           | MANAGING MEMBER                    | Title           | MGRM                                |
| Name            | CIELO, MARIE                       | Name            | HAVENS, THOMAS                      |
| Address         | 1906 NORTH ARMENIA ST<br>SUITE 315 | Address         | 1906 NORTH ARMENIA ST.<br>SUITE 315 |
| City-State-Zip: | TAMPA FL 33607                     | City-State-Zip: | TAMPA FL 33607                      |

*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:** THOMAS HAVENS

**OWNER**

03/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date