

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000005004

**Entity Name:** AMERICAN PIXEL, LLC

**Current Principal Place of Business:**

110 SW PARSHLEY ST SUITE C  
LIVE OAK, FL 32064

**Current Mailing Address:**

110 SW PARSHLEY ST SUITE C  
LIVE OAK, FL 32064

**FEI Number:** 45-4225666

**Certificate of Status Desired:** No

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

JOHNSON, WILLIAM  
110 SW PARSHLEY ST SUITE C  
LIVE OAK, FL 32064 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	Title	MGRM
Name	LOOS, MARTY	Name	JOHNSON, WILLIAM
Address	114 PARSHLEY ST	Address	9299 127TH DR.
City-State-Zip:	LIVE OAK FL 32064	City-State-Zip:	LIVE OAK FL 32064

*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:** WILLIAM JOHNSON

**MANAGER**

**04/14/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date