| OT. TETEROD  |  |                 |                                   |            |
|--|--|-----------------|-----------------------------------|------------|
| Current Ma   | iling Address:                           |                 |                                   |            |
| P.O. BOX 80<br>TAMPA, FL   | 099<br>33674-8099 US                     |                 |                                   |            |
| FEI Number: 46-0547457   |  |                 | Certificate of Status Desired: No |            |
| Name and A   | Address of Current Registered Agent:     |                 |                                   |            |
| BCM REGIST,<br>3495 5TH AVE<br>ST. PETERSB   |  |                 |                                   |            |
| 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. |  |                 |                                   |            |
| SIGNATUR   | E: BEAUGENDRE, FRANCK                    |                 |                                   | 01/20/2022 |
|  | Electronic Signature of Registered Agent |                 |                                   | Date       |
| Authorized   | Person(s) Detail :                       |                 |                                   |            |
| Title  | MANAGER                                  | Title           | MANAGER                           |            |
| Name   | BLUE CEDAR MANAGEMENT LLC                | Name            | BEAUGENDRE, FRANCK                |            |
| Address  | 3495 5TH AVE N                           | Address         | 3495 5TH AVE N                    |            |
| City-State-Zip:  | ST. PETERSBURG FL 33713                  | City-State-Zip: | ST. PETERSBURG FL 33713           |            |
| Title  |  |                 |                                   |            |
|  | MANAGER                                  |                 |                                   |            |
| Name   | MANAGER<br>GREENWOOD, NANCY              |                 |                                   |            |
| Name<br>Address  |  |                 |                                   |            |
|  | GREENWOOD, NANCY<br>3495 5TH AVE N       |                 |                                   |            |

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.

MGR

SIGNATURE: BEAUGENDRE, FRANCK

## 01/20/2022

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L12000088342

Entity Name: FAREIC, LLC

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

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

3495 5TH AVE N ST. PETERSBURG, FL 33713 FILED Jan 20, 2022 Secretary of State 0445762739CC

Date