FEI Number: Name and Ad	46-0841721 dress of Current Registered Agent	:	Certificate of Status
	ITE DRIVE RINGS, FL 32714 US ntity submits this statement for the purpose of chang	nina its reaistered office or re	aistered agent. or both. in the State
SIGNATURE	JOSEPH LENTI II		
	Electronic Signature of Registered Agent		
Authorized P	erson(s) Detail :		
		Title	

Current Principal Place of Business: 581 NORTH PARK AVE. #1802

DOCUMENT# L12000099169

APOPKA, FL 32704

Current Mailing Address:

P.O. BOX 1802 APOPKA, FL 32704 US

F

Name

Address

Ν

Entity Name: FIRST ORMOND MANAGEMENT LLC

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

QUIMBY, LAURA

P.O, BOX 1802

City-State-Zip: APOPKA FL 32704

Th te of Florida.

Name

Address

City-State-Zip:

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: LAURA QUIMBY

MANAGER

03/01/2021

Electronic Signature of Signing Authorized Person(s) Detail



03/01/2021 Date

Desired: No

QUIMBY, KEVIN

P.O. BOX 1802 APOPKA FL 32704

Date