

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000116703

Entity Name: DOGS DELIVERING INDEPENDENCE, LLC**Current Principal Place of Business:**3251 NE 180TH AVE.
WILLISTON, FL 32696**Current Mailing Address:**3251 NE 180TH AVE.
WILLISTON, FL 32696 US**FEI Number:** 46-0968184**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BORDEN, CAROL
3251 NE 180TH AVE.
WILLISTON, FL 32696 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	MGR
Name	BORDEN, CAROL
Address	3251 NE 180TH AVE.
City-State-Zip:	WILLISTON FL 32696

Title	MGRM
Name	GALMICHE, KAREN
Address	2885 PGA BLVD.
City-State-Zip:	NAVARRE FL 32566

Title	MGRM
Name	BORDEN, JAMES
Address	3251 NE 180TH AVE.
City-State-Zip:	WILLISTON FL 32696

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: CAROL J BORDEN

MGR

02/18/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date