## **2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000157742

Entity Name: GATRENTONLAS LLC

**Current Principal Place of Business:** 

2746 SE EAGLE DR.

PORT ST. LUCIE. FL 34984

**Current Mailing Address:** 

PO BOX 7997

PORT ST. LUCIE. FL 34985 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAMMULI, LYNN 2746 SE EAGLE DR.

PORT ST. LUCIE, FL 34984 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: LYNN SAMMULI 01/31/2023

Electronic Signature of Registered Agent

Date

FILED Jan 31, 2023

**Secretary of State** 

4448431737CC

Authorized Person(s) Detail:

Title MGR Title MGR

Name SAMMULI, LYNN Name HALL, DIANA K.

Address 2746 SE EAGLE DR. Address 1266 POUNDS LANE

City-State-Zip: PORT ST. LUCIE FL 34984 City-State-Zip: CLARKSTON GA 30021

Title MGR

Name CIPRIANI, DEBRA
Address 753 ST. CROIX COVE

City-State-Zip: PORT ST. LUCIE FL 34986

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: LYNN SAMMULI MGR

Electronic Signature of Signing Authorized Person(s) Detail

01/31/2023

Date