Authorized Person(s) Detail :				
	Electronic Signature of Registered Agent			
SIGNATURE:	PETER J PYTLIK			
The above named e	ntity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florid			
3504 WESTVIEW NAPLES, FL 341	DRIVE			

2023 FLORIDA LIMITED LIABILITY CO	<u>MPANY ANNUAL REPORT</u>
DOCUMENT# L13000041715	

Entity Name: 3504 WESTVIEW, LLC

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

3504 WESTVIEW DRIVE NAPLES. FL 34104

#### **Current Mailing Address:**

3504 WESTVIEW DRIVE NAPLES, FL 34104

# FEI Number: 46-4458396

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

PYTLIK, PETER J 3504 W NAPLES

Authorized Person(s) Detail :				
Title	MGRM	Title	MGRM	
Name	PYTLIK, PETER J	Name	PYTLIK, KIM M	
Address	3504 WESTVIEW DRIVE	Address	3504 WESTVIEW DRIVE	
City-State-Zip:	NAPLES FL 34104	City-State-Zip:	NAPLES FL 34104	

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: PETER PYTLIK

PRESIDENT

02/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Feb 01, 2023 Secretary of State 3197787607CC

02/01/2023 Date

Certificate of Status Desired: No