

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000106846

Entity Name: PROTEK NURSERIES LLC**Current Principal Place of Business:**8712 60TH TER S
LAKE WORTH, FL 33467**Current Mailing Address:**8712 60TH TER S
LAKE WORTH, FL 33467 US**FEI Number:** 46-3423582**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEVY, JONATHAN
8712 60TH TERRACE SO
LAKE WORTH, FL 33467 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:** JONATHAN LEVY

06/10/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MEMB	Title	AMBR
Name	LEVY, JONATHAN	Name	LEVY, JONATHAN
Address	8712 60TH TERRACE SO	Address	8712 60TH TERRACE SO
City-State-Zip:	LAKE WORTH FL 33467	City-State-Zip:	LAKE WORTH FL 33467

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: JONATHAN LEVY**PRESIDENT**

06/10/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date