## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000144569

Entity Name: QUATTOUR CHELONIA, LLC

**Current Principal Place of Business:** 

1373 N ATLANTIC AVENUE NEW SMYRNA BEACH. FL 32169

**Current Mailing Address:** 

1373 N ATLANTIC AVENUE

NEW SMYRNA BEACH. FL 32169 US

FEI Number: 46-3863756 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAZEN, KIRK J 1373 N ATLANTIC AVENUE NEW SMYRNA BEACH, FL 32169 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

FILED Apr 15, 2024

**Secretary of State** 

4415993212CC

Authorized Person(s) Detail:

SIGNATURE: KIRK J. HAZEN

Title MGR Title

Name HAZEN, KIRK J Name HAZEN, KATHARINE M
Address 1373 N ATLANTIC AVENUE Address 1373 N ATLANTIC AVENUE

City-State-Zip: NEW SMYRNA BEACH FL 32169 City-State-Zip: NEW SMYRNA BEACH FL 32169

MGR

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.

**MGR**