2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000138418

Entity Name: P4 UNIVERSITY LLC

Current Principal Place of Business:

8471 COOPER CREEK BLVD UNIVERSITY PARK, FL 34201

Current Mailing Address:

5942 34TH STREET W SUITE 106 BRADENTON, FL 34210 US

FEI Number: 61-1746092

Name and Address of Current Registered Agent:

JASKULSKI, CYNTHIA S 7809 54TH CT E PALMETTO, FL 34221 US FILED Mar 11, 2024 Secretary of State 7950125284CC

Certificate of Status Desired: No

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

Authorized Person(s) Detail :

| | / | | | |
|--|-----------------|-----------------------------|-----------------|-------------------------------|
| | Title | MGR | Title | MGRM |
| | Name | TAQUERIA RESTAURANTS GROUP, | Name | COLEMAN, PATRICK |
| | Address | LLC P.O. BOX 1678 | Address | P.O. BOX 1678 |
| | Audress | F.O. DOX 1078 | City-State-Zip: | ANNA MARIA FL 34216 |
| | City-State-Zip: | ANNA MARIA FL 34216 | | |
| | | | | |
| | | | Title | MGR |
| | Title | MGR | | |
| | Title Name | MGR COLEMAN, CASEY | Title Name | MGR BEALS, KAITLIN |
| | Name | COLEMAN, CASEY | | |
| | | | Name Address | BEALS, KAITLIN PO BOX 1678 |
| | Name | COLEMAN, CASEY | Name | BEALS, KAITLIN PO BOX 1678 |

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: PATRICK COLEMAN | MGRM |
|----------------------------|------|
| | |

Electronic Signature of Signing Authorized Person(s) Detail

03/11/2024 Date

Date