ST. PETE BEA	CH, FL 33706			
Current Ma	iling Address:			
4506 GULF ST. PETE B	BLVD. EACH, FL 33706 US			
FEI Number: 47-2301376			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
CZYSZCZON,				
4506 GULF BL ST. PETE BEA	CH, FL 33706 US			
ST. PETE BEA	CH, FL 33706 US d entity submits this statement for the purpose of changing its reg	istered office or regis	tered agent, or both, in the State of Flo	orida.
ST. PETE BEA		istered office or regis	tered agent, or both, in the State of Flo	orida. 03/19/2024
ST. PETE BEA	d entity submits this statement for the purpose of changing its reg	istered office or regis	tered agent, or both, in the State of Flo	
ST. PETE BEA The above name SIGNATURI	d entity submits this statement for the purpose of changing its reg E: ROBERT CZYSZCZON	istered office or regis	tered agent, or both, in the State of Flo	03/19/2024
ST. PETE BEA The above name SIGNATURI	d entity submits this statement for the purpose of changing its reg E: ROBERT CZYSZCZON Electronic Signature of Registered Agent	istered office or regis	tered agent, or both, in the State of Flo	03/19/2024 Date
ST. PETE BEA The above name SIGNATURI Authorized	d entity submits this statement for the purpose of changing its reg E: ROBERT CZYSZCZON Electronic Signature of Registered Agent <b>Person(s) Detail :</b>			03/19/2024 Date
ST. PETE BEA The above name SIGNATURI Authorized Title	d entity submits this statement for the purpose of changing its reg E: ROBERT CZYSZCZON Electronic Signature of Registered Agent <b>Person(s) Detail :</b> MGR	Title	AUTHORIZED REPRESENTAT	03/19/2024 Date

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: ROBERT CZYSZCZON

MANAGER

03/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000174446

Entity Name: CZYSZCZON VENTURES LLC

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

4209 GULF BLVD.

FILED Mar 19, 2024 **Secretary of State** 4721028590CC

Date