

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000018777

**Entity Name:** CATALYST QLM LLC

**Current Principal Place of Business:**

4035 W 1ST STREET  
SANFORD, FL 32771

**Current Mailing Address:**

P.O. BOX 470400  
LAKE MONROE, FL 32747

**FEI Number:** 47-2582218

**Certificate of Status Desired:** No

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

PATTILLO, SHERRI L  
4035 W 1ST STREET  
SANFORD, FL 32771 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

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	LEE, JACQUELINE	Name	LANG, MARK A SR.
Address	4035 W 1ST STREET	Address	4035 W 1ST STREET
City-State-Zip:	SANFORD FL 32771	City-State-Zip:	SANFORD FL 32771

*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:** MARK A LANG SR

MGR

03/20/2023

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date