

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000056465

Entity Name: TRIPLE M TINKER HOLDINGS LLC**Current Principal Place of Business:**10223 GLACIER CT
ORLANDO, FL 32821**Current Mailing Address:**10223 GLACIER CT
ORLANDO, FL 32821**FEI Number:** 47-3629492**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PONCE, MONY R
10223 GLACIER CT
ORLANDO, FL 32821 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	MANAGER
Name	PONCE, MARISOL
Address	10331 MATCHLOCK DR
City-State-Zip:	ORLANDO FL 32821

Title	MGR
Name	PONCE, RAMIRO
Address	10223 GLACIER CT
City-State-Zip:	ORLANDO FL 32821

Title	AUTHORIZED MEMBER
Name	PONCE, MONY R
Address	10223 GLACIER CT
City-State-Zip:	ORLANDO FL 32821

Title	AUTHORIZED MEMBER
Name	PONCE, MIRIAM L
Address	10223 GLACIER CT
City-State-Zip:	ORLANDO FL 32821

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: RAMIRO PONCE

MANAGER

03/23/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date