Entity Name: 10700 1ST AVE GULF, LLC		Secretary of State 8388481882CC		
241 4TH ST	ncipal Place of Business: BEACH, FL 33051		03004010	002UU
Current Mai	ling Address:			
PO BOX 510 KEY COLON	0293 IY BEACH, FL 33051 US			
FEI Number: 47-4269080			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
241 4TH ST	EVE FLOOD, LLC BEACH, FL 33051 US			
	d entity submits this statement for the purpose of changing its regis	tered office or regis		
	H entity submits this statement for the purpose of changing its regis MARIE AND STEVE FLOOD LLC Electronic Signature of Registered Agent	tered office or regis		^{da.} 03/10/2023 Date
SIGNATURE	MARIE AND STEVE FLOOD LLC	tered office or regis		03/10/2023
SIGNATURE	E: MARIE AND STEVE FLOOD LLC Electronic Signature of Registered Agent	tered office or regis		03/10/2023
SIGNATURE	MARIE AND STEVE FLOOD LLC Electronic Signature of Registered Agent Person(s) Detail :			03/10/2023
SIGNATURE Authorized	MARIE AND STEVE FLOOD LLC Electronic Signature of Registered Agent Person(s) Detail : MGR	Title	AMBR	03/10/2023
SIGNATURE Authorized Title Name Address	MARIE AND STEVE FLOOD LLC Electronic Signature of Registered Agent Person(s) Detail : MGR MARIE AND STEVE FLOOD, LLC	Title Name Address	AMBR FLOOD, MARIE H	03/10/2023 Date
SIGNATURE Authorized Title Name Address	MARIE AND STEVE FLOOD LLC Electronic Signature of Registered Agent Person(s) Detail : MGR MARIE AND STEVE FLOOD, LLC PO BOX 510293	Title Name Address	AMBR FLOOD, MARIE H PO BOX 510293	03/10/2023 Date
SIGNATURE Authorized Title Name Address City-State-Zip:	E: MARIE AND STEVE FLOOD LLC Electronic Signature of Registered Agent Person(s) Detail : MGR MARIE AND STEVE FLOOD, LLC PO BOX 510293 KEY COLONY BEACH FL 33051	Title Name Address	AMBR FLOOD, MARIE H PO BOX 510293	03/10/2023 Date

City-State-Zip: LITTLETON CO 80120

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: MARIE FLOOD

MGR

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L15000211422

FILED Mar 10, 2023 ecretary of State 8388481882CC

Date