

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000002934

**Entity Name:** VITO MOROLLA, LLC

**Current Principal Place of Business:**

213 HAAS AVE.  
SAINT AUGUSTINE, FL 32095

**Current Mailing Address:**

213 HAAS AVE.  
SAINT AUGUSTINE, FL 32095 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MOROLLA, VITO  
213 HAAS AVE.  
SAINT AUGUSTINE, FL 32095 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            CEO  
Name            MOROLLA, VITO  
Address        213 HAAS AVE.  
City-State-Zip: SAINT AUGUSTINE FL 32095

*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:** VITO MOROLLA

CEO

04/11/2023

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

\_\_\_\_\_ Date