| 210 HILLSBOR  | ncipal Place of Business:<br>O TECHNOLOGY DRIVE<br>EACH, FL 33441  |                          |  |      |
|---|--|--------------------------|--|------|
| Current Mai   | ling Address:  |                          |  |      |
|   | ORO TECHNOLOGY DRIVE<br>BEACH, FL 33441 US   |                          |  |      |
| FEI Number: 38-4016925 Certificate of Status De                               |  |                          | Certificate of Status Desired: N                         | C    |
| Name and A  | ddress of Current Registered Agent:  |                          |  |      |
| REGISTERED  | AGENT SOLUTIONS, INC.  |                          |  |      |
| SUITE A   | TON GREEN LANE<br>, FL 32308 US  |                          |  |      |
| SUITE A<br>TALLAHASSEE  |  | gistered office or regis | tered agent, or both, in the State of Florida.           |      |
| SUITE A<br>TALLAHASSEE<br>The above named                                     | , FL 32308 US  | gistered office or regis | tered agent, or both, in the State of Florida.<br>04/29, | 2023 |
| SUITE A<br>TALLAHASSEE<br>The above named                                     | FL 32308 US  | gistered office or regis | 5  |      |
| SUITE A<br>TALLAHASSEE<br>The above named<br>SIGNATURE                        | e, FL 32308 US d entity submits this statement for the purpose of changing its re-   | gistered office or regis | 04/29/   |      |
| SUITE A<br>TALLAHASSEE<br>The above named<br>SIGNATURE                        | <ul> <li>FL 32308 US</li> <li>d entity submits this statement for the purpose of changing its registered</li> <li>MACKENZIE HART</li> <li>Electronic Signature of Registered Agent</li> </ul>  | gistered office or regis | 04/29/   |      |
| SUITE A<br>TALLAHASSEE<br>The above named<br>SIGNATURE<br>Authorized          | <ul> <li>FL 32308 US</li> <li>d entity submits this statement for the purpose of changing its report of the purpose of changing its report in the purpose of changing its report in the purpose of the purpose o</li></ul>         |                          | 04/29,<br>Da   |      |
| SUITE A<br>TALLAHASSEE<br>The above named<br>SIGNATURE<br>Authorized<br>Title | <ul> <li>FL 32308 US</li> <li>d entity submits this statement for the purpose of changing its report of the purpose of the purpose of changing its report of the purpose of the purpose of changing its report of the purpose of th</li></ul> | Title                    | 04/29,<br>Da   |      |

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: RICHARD WEISSMAN

MANAGER

04/29/2023

Electronic Signature of Signing Authorized Person(s) Detail

## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000047970

Entity Name: TLE AT APOPKA, LLC

## ant Bringing, Blace of Business ~

FILED Apr 29, 2023 **Secretary of State** 9903668648CC

Date