2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000085594

Entity Name: ML-METRO, LLC

Current Principal Place of Business:

2261 OCEANWALK DR W ATLANTIC BEACH, FL 32233

2261 OCEANWALK DR W

,

Current Mailing Address:

2261 OCEANWALK DR W ATLANTIC BEACH, FL 32233 US

FEI Number: 81-2543480 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASTRANOVA, ROBERT J 2261 OCEANWALK DR W ATLANTIC BEACH, FL 32233 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

FILED Jan 23, 2022

Secretary of State

9008421230CC

Authorized Person(s) Detail :

Title MGR Title AMBR

Name CASTRANOVA, ROBERT J Name KIFER, LARRY L

Address 2261 OCEANWALK DR W Address 143 WHISPERING OAK CIR
City-State-Zip: ATLANTIC BEACH FL 32233 City-State-Zip: ST AUGUSTINE FL 32082

Title AMBR Title AMBR

Name KIFER, RHONDA L Name STEVENS, MICHAEL D

Address 143 WHISPERING OAK CIR Address 324 QUAIL POINT DR

City-State-Zip: ST AUGUSTINE FL 32082 City-State-Zip: PONTE VEDRA BEACH FL 32082

Title AMBR Title AMBR

Name CATLETT, RICHARD Name DESMEDT, ROBERT

Address 324 QUAIL POINT DR Address 717 PONTE VEDRA BLVD

City-State-Zip: PONTE VEDRA BEACH FL 32082 City-State-Zip: PONTE VEDRA BEACH FL 32082

Title AMBR Title AMBR

Name ROBERT J. CASTRANOVA, AS Name ANDREW PRADELLA AND JOAN

TRUSTEE OF THE ROBERT J

CASTRANOVA REVOCABLE TRUST,
DATED OCT 21, 2005

PRADELLA, AS TRUSTEE OF THE
ANDREW AND JOAN PRADELLA
JOINT REVOCABLE LIVING TRUST,

DATED DEC 8, 2015

Address 2261 OCEANWALK DR W Address 129 MIDDLETON PLACE

City-State-Zip: ATLANTIC BEACH FL 32233 City-State-Zip: PONTE VEDRA BEACH FL 32082

Continues on page 2

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: ROBERT CASTRANOVA MANAGER 01/23/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

Title AMBR

Name

JAMES G FREY AND JOAN S FREY, AS TRUSTEES OF THE JAMES G FREY TRUST, DATED APRIL 28, 2005, AS AMENDED

234 MARSH HOLLOW ROAD Address City-State-Zip: PONTE VEDRA FL 32081