

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000149836

Entity Name: 3325 WOODLAWN, LLC

Current Principal Place of Business:

1900 N NEBRASKA AVE
TAMPA, FL 33602

Current Mailing Address:

1900 N NEBRASKA AVE
TAMPA, FL 33602 US

FEI Number: 81-3576372

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MENENDEZ, BRIAN
1900 N NEBRASKA AVE
TAMPA, FL 33602 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: BRIAN JOSEPH MENENDEZ

03/20/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | | | |
|-----------------|---------------------|-----------------|---------------------|
| Title | VP | Title | MGR |
| Name | MENENDEZ, GILBERT J | Name | MENENDEZ, DARLENE |
| Address | 1900 N NEBRASKA AVE | Address | 1900 N NEBRASKA AVE |
| City-State-Zip: | TAMPA FL 33602 | City-State-Zip: | TAMPA FL 33602 |
| | | | |
| Title | PRESIDENT | Title | MGR |
| Name | MENENDEZ, BRIAN | Name | WHITE, KAREN |
| Address | 1900 N NEBRASKA AVE | Address | 1900 N NEBRASKA AVE |
| City-State-Zip: | TAMPA 33602 | City-State-Zip: | TAMPA FL 33602 |

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: BRIAN J MENENDEZ

PRESIDENT

03/20/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date