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 [,] FABEN SOUBLET	FABEN SOUBLET	02/26/2024

FABEN SOUBLET

SIGNATURE: FABEN SOUBLET

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L17000003110 Entity Name: 1ST CLASS TAXI AND SHUTTLE OF PENSACOLA LLC

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

2825 LOGAN DR PENSACOLA, FL 32503

Current Mailing Address:

115 SE SYRCLE DR PENSACOLA. FL 32507 US

FEI Number: 81-4176218

Name and Address of Current Registered Agent:

SOUBLET, FABEN 115 SE SYRCLE DR PENSACOLA, FL 32507 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: FABEN SOUBLET

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGR
Name	SOUBLET, FABEN
Address	2825 LOGAN DR
City-State-Zip:	PENSACOLA FL 32503

Certificate of Status Desired: No

02/26/2024 Date

Date