

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000024312

**Entity Name:** TDPP LLC

**Current Principal Place of Business:**

415 HALIFAX AVE. UNIT 216  
DAYTONA BEACH, FL 32118

**Current Mailing Address:**

P.O. BOX 530736  
DEBARY, FL 32753-0736 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ACCOUNTING ALLIANCE FOR SMALL BUSINESS PA  
6453 S. ORANGE AVE.  
SUITE #3  
ORLANDO, FL, FL 32809 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	MGR	Title	AMBR
Name	HATCH, CAROLINE	Name	GABRIEL, KYLE
Address	P.O. BOX 530736	Address	P.O. BOX 530736
City-State-Zip:	DEBARY FL 32753-0736	City-State-Zip:	DEBARY FL 32753-0736

*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:** CAROLINE HATCH

MGR

04/27/2023

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

\_\_\_\_\_  
Date