

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000081634

**Entity Name:** HORVATH & TREMBLAY FL, LLC

**Current Principal Place of Business:**

600 MARKET STREET  
SUITE 686  
LYNNFIELD, MA 01940

**Current Mailing Address:**

600 MARKET STREET  
SUITE 686  
LYNNFIELD, MA 01940 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

REGISTERED AGENT SOLUTIONS, INC.  
155 OFFICE PLAZA DR.  
SUITE A  
TALLAHASSEE, FL 32301 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           MANAGER  
Name           HORVATH, ROBERT M  
Address       600 MARKET STREET  
                  SUITE 686  
City-State-Zip: LYNNFIELD MA 01940

Title           MANAGER  
Name           TREMBLAY, TODD R.  
Address       600 MARKET STREET  
                  SUITE 686  
City-State-Zip: LYNNFIELD MA 01940

Title           AUTHORIZED MEMBER  
Name           COLE, ETHAN  
Address       600 MARKET STREET  
                  SUITE 686  
City-State-Zip: LYNNFIELD MA 01940

*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:** TREMBLAY , TODD R.

**MANAGER**

**02/22/2023**

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

\_\_\_\_\_  
Date