

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000063883

Entity Name: GL CAPRI LLC

Current Principal Place of Business:

4 VIA CAPRI
PALM COAST, FL 32137

Current Mailing Address:

P.O.BOX 352045
PALM COAST, FL 32135 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIAN, LI
1454 EL CONTE DR.
DAVENPORT , FL 33896 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 MGRM
Name MITSOPOULOS, JEFFREY
Address P.O.BOX 352045
City-State-Zip: PALM COAST FL 32135

Title AUTHORIZED REPRESENTATIVE
Name LIAN, LI
Address P.O.BOX 352045
City-State-Zip: PALM COAST FL 32137

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: LI LIAN

AR

01/18/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date