

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000127617

Entity Name: 423 ATLANTIC, LLC**Current Principal Place of Business:**612 SYLVAN RESERVE COVE
SANFORD, FL 32771**Current Mailing Address:**612 SYLVAN RESERVE COVE
SANFORD, FL 32771 US**FEI Number:** 83-0640560**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ANDRE, MATTHEW W
612 SYLVAN RESERVE COVE
SANFORD, FL 32771 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	AMBR
Name	MATTHEW W. ANDRE AND ANGELA B. ANDRE, AS TRUSTEES OF ANDRE FAMILY JOINT TRUST DATED NOVEMBER 28, 2017
Address	612 SYLVAN RESERVE COVE
City-State-Zip:	SANFORD FL 32771

Title	MGR
Name	ANDRE, MATTHEW W
Address	612 SYLVAN RESERVE COVE
City-State-Zip:	SANFORD FL 32771

Title	MGR
Name	ANDRE, ANGELA B
Address	612 SYLVAN RESERVE COVE
City-State-Zip:	SANFORD FL 32771

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: MATTHEW W ANDRE**REGISTERED AGENT****02/17/2023**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date