

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000150643

**Entity Name:** THE BUG ASSASSIN'S LLC

**Current Principal Place of Business:**

8500 20TH ST.  
P.O. BOX 690246  
VERO BEACH, FL 32969

**Current Mailing Address:**

8500 20TH ST.  
P.O. BOX 690246  
VERO BEACH, FL 32969 US

**FEI Number:** 83-0979914

**Certificate of Status Desired:** No

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

PRESTI, JOHN  
8500 20TH ST  
P.O. BOX 690246  
VERO BEACH, FL 32968 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	Title	AMBR
Name	PRESTI, JOHN	Name	SOUZA, TYLER
Address	8500 20TH ST. P.O. BOX 690246	Address	8500 20TH ST. P.O. BOX 690246
City-State-Zip:	VERO BEACH FL 32969	City-State-Zip:	VERO BEACH FL 32969

*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:** JOHN PRESTI

**REGISTERED AGENT**

**01/19/2023**

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

\_\_\_\_\_  
Date