

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000150643

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

**Current Principal Place of Business:**

1913 SW CASTINET LANE  
PORT ST LUCIE, FL 34953

**Current Mailing Address:**

1913 SW CASTINET LANE  
PORT ST LUCIE, FL 34953 US

**FEI Number: 83-0979914**

**Certificate of Status Desired: Yes**

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

PRESTI, JOHN  
1913 SW CASTINET LANE  
PORT ST LUCIE, FL 34953 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            PRESTI, JOHN  
Address        1913 SW CASTINET LANE  
City-State-Zip: PORT ST LUCIE FL 34953

Title            AMBR  
Name            SOUZA, TYLER  
Address        16032 E. AINTREE DR.  
City-State-Zip: LOXAHATCHEE FL 33470

*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**

**PRESIDENT**

**03/15/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date