

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000246453

**Entity Name:** MA-DI-TA, LLC

**Current Principal Place of Business:**

150 NW GREEN LN  
LAKE CITY, FL 32055

**Current Mailing Address:**

PO BOX 204  
LAKE CITY, FL 32056 US

**FEI Number:** 83-4537328

**Certificate of Status Desired:** No

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

COSTANTINI, VALERIE  
150 NW GREEN LN  
LAKE CITY, FL 32055 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:** VALERIE COSTANTINI

03/15/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name COSTANTINI, VALERIE  
Address 150 NW GREEN LN  
City-State-Zip: LAKE CITY FL 32055

*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:** VALERIE COSTANTINI

MGR

03/15/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date