

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000265510

**Entity Name:** LONGITUDELE420, LLC

**Current Principal Place of Business:**

25 JOHNSON AVENUE  
RONKONKOMA, NY 11779

**Current Mailing Address:**

25 JOHNSON AVENUE  
RONKONKOMA, NY 11779 US

**FEI Number: 83-2790656**

**Certificate of Status Desired: No**

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

LONG, DAVID J III  
6000 BROKEN SOUND PARKWAY NW  
STE 200  
BOCA RATON, FL 33487 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            LONG, DAVID J III  
Address        744 SEASAGE DRIVE  
City-State-Zip: DELRAY BEACH FL 33433

Title            AMBR  
Name            LONG, KELLIE J  
Address        744 SEASAGE DRIVE  
City-State-Zip: DELRAY BEACH FL 33433

*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: DAVID LONG**

**MEMBER**

**02/29/2024**

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

\_\_\_\_\_  
Date