

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000021177

Entity Name: MAGELLAN ENTERPRISE LLC**Current Principal Place of Business:**2527 S. HARBOR CITY BLVD
MELBOURNE, FL 32901**Current Mailing Address:**2527 S. HARBOR CITY BLVD
MELBOURNE, FL 32901 US**FEI Number:** 83-3314293**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DEE, MARK ANTHONY K
2527 S. HARBOR CITY BLVD
MELBOURNE, FL 32901 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 | MGR |
| Name | DEE, STACEY M |
| Address | 2527 S. HARBOR CITY BLVD |
| City-State-Zip: | MELBOURNE FL 32901 |

| | |
|-----------------|--------------------------|
| Title | AMBR |
| Name | DEE, MARK ANTHONY K |
| Address | 2527 S. HARBOR CITY BLVD |
| City-State-Zip: | MELBOURNE FL 32901 |

| | |
|-----------------|--------------------------|
| Title | SECRETARY |
| Name | GARCIA, FALEIGN P |
| Address | 2527 S. HARBOR CITY BLVD |
| City-State-Zip: | MELBOURNE FL 32901 |

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: MARK ANTHONY K. DEE**PRESIDENT****02/01/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date