| 5524 PINE TRE<br>PANAMA CITY  | E AVE<br>BEACH, FL 32408   |  |   |           |
|---|--|--|---|-----------|
| Current Mai   | ling Address:  |  |   |           |
| 5524 PINE 1<br>PANAMA CI  | REE<br>TY BEACH, FL 32408 US   |  |   |           |
| FEI Number: 83-3550646  |  |  | Certificate of Status Desired: No   |           |
| Name and A  | Address of Current Registered Agent:   |  |   |           |
| GOLDEN CUT<br>5524 PINE TRE<br>PANAMA CITY                                      | -  |  |   |           |
|   |  |  |   |           |
| The above name  | d entity submits this statement for the purpose of changing its regis  | stered office or regis                               | tered agent, or both, in the State of Florida   |           |
|   | d entity submits this statement for the purpose of changing its regis<br>: KURKO HENADII   | stered office or regis                               |   | 4/18/2023 |
|   |  | stered office or regis                               |   |           |
| SIGNATURE   | E: KURKO HENADII<br>Electronic Signature of Registered Agent   | stered office or regis                               |   | 4/18/2023 |
| SIGNATURE   | E: KURKO HENADII   | tered office or regis                                |   | 4/18/2023 |
| SIGNATURE<br>Authorized   | E: KURKO HENADII<br>Electronic Signature of Registered Agent<br>Person(s) Detail :   |  | 0   | 4/18/2023 |
| SIGNATURE<br>Authorized   | E: KURKO HENADII<br>Electronic Signature of Registered Agent<br>Person(s) Detail :<br>MANAGER  | Title  | 0<br>MANAGER  | 4/18/2023 |
| SIGNATURE<br>Authorized<br>Title<br>Name  | E: KURKO HENADII<br>Electronic Signature of Registered Agent<br>Person(s) Detail :<br>MANAGER<br>KURKO, HENNADII<br>11733SAND CASTLE LN  | Title<br>Name<br>Address                             | 0<br>MANAGER<br>KURKO, NATALIIA   | 4/18/2023 |
| SIGNATURE<br>Authorized<br>Title<br>Name<br>Address                             | E: KURKO HENADII<br>Electronic Signature of Registered Agent<br>Person(s) Detail :<br>MANAGER<br>KURKO, HENNADII<br>11733SAND CASTLE LN  | Title<br>Name<br>Address                             | 0<br>MANAGER<br>KURKO, NATALIIA<br>11733SAND CASTLE LN  | 4/18/2023 |
| SIGNATURE<br>Authorized<br>Title<br>Name<br>Address<br>City-State-Zip:          | E: KURKO HENADII<br>Electronic Signature of Registered Agent<br>Person(s) Detail :<br>MANAGER<br>KURKO, HENNADII<br>11733SAND CASTLE LN<br>PANAMA CITY BEACH FL 32407            | Title<br>Name<br>Address<br>City-State-Zip:          | 0<br>MANAGER<br>KURKO, NATALIIA<br>11733SAND CASTLE LN<br>PANAMA CITY BEACH FL 32407            | 4/18/2023 |
| SIGNATURE<br>Authorized<br>Title<br>Name<br>Address<br>City-State-Zip:<br>Title | E: KURKO HENADII<br>Electronic Signature of Registered Agent<br>Person(s) Detail :<br>MANAGER<br>KURKO, HENNADII<br>11733SAND CASTLE LN<br>PANAMA CITY BEACH FL 32407<br>MANAGER | Title<br>Name<br>Address<br>City-State-Zip:<br>Title | 0<br>MANAGER<br>KURKO, NATALIIA<br>11733SAND CASTLE LN<br>PANAMA CITY BEACH FL 32407<br>MANAGER | 4/18/2023 |

2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L19000034385

Entity Name: GOLDEN CUT LLC

**Current Principal Place of Business:** 

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: HENNADII KURKO

Electronic Signature of Signing Authorized Person(s) Detail

OWNER

Date

FILED Apr 18, 2023

Secretary of State

6824892901CC