

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000075093

**Entity Name:** SHADOWLINE FLY COMPANY LLC

**Current Principal Place of Business:**

1320 SE 44TH ST  
CAPE CORAL, FL 33904

**Current Mailing Address:**

1320 SE 44TH ST  
CAPE CORAL, FL 33904 US

**FEI Number: 85-0906728**

**Certificate of Status Desired:** No

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

CHIRHART, MATTHEW D  
1320 SE 44TH ST  
CAPE CORAL, FL 33904 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	Title	MGR
Name	CHIRHART, MATTHEW D	Name	PICHETTE, MATTHEW M
Address	1320 SE 44TH ST	Address	1320 SE 44TH ST
City-State-Zip:	CAPE CORAL FL 33904	City-State-Zip:	CAPE CORAL FL 33904

*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: MATTHEW CHIRHART**

**MANAGER**

**04/12/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date