

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000079761

**Entity Name:** SILVER FISH LLC

**Current Principal Place of Business:**

509 S PONCE DE LEON BLVD  
ST. AUGUSTINE, FL 32084

**Current Mailing Address:**

509 S PONCE DE LEON BLVD  
ST. AUGUSTINE, FL 32084 US

**FEI Number:** 83-4604903

**Certificate of Status Desired:** No

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

FREEMAN, MARK A  
4700 MILLENIA BLVD  
SUITE 500-5049  
ORLANDO, FL 32839 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:** MARK A FREEMAN

05/01/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AUTHORIZED MEMBER	Title	MANAGER
Name	SILVA, BEATRIZ	Name	SILVA, VICTOR
Address	PO BOX 1486	Address	PO BOX 1486
City-State-Zip:	BUNNELL FL 32110	City-State-Zip:	BUNNELL FL 32110

*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:** VICTOR SILVA

MANAGER

05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date