

**2022 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  
2750 TAYLOR AVENUE  
SUITE A-5  
ORLANDO, FL 32806 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

04/30/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AMBR	Title	AUTHORIZED MEMBER
Name	FRISCH, ANDREW S	Name	SILVA, BEATRIZ
Address	135 JENKINS ST STE 105B-346	Address	PO BOX 1486
City-State-Zip:	SAINT AUGUSTINE FL 32086	City-State-Zip:	BUNNELL FL 32110
Title	MANAGER		
Name	SILVA, VICTOR		
Address	509 S PONCE DE LEON BLVD		
City-State-Zip:	ST. AUGUSTINE FL 32084		

*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

04/30/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date