

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000094728

**Entity Name:** 328 MLKN SAFETY HARBOR LLC

**Current Principal Place of Business:**

11801 GLEN WESSEX CT  
TAMPA, FL 33626

**Current Mailing Address:**

11801 GLEN WESSEX CT  
TAMPA, FL 33626 US

**FEI Number:** 86-2862770

**Certificate of Status Desired:** Yes

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

RUMSEY FAMILY TRUST  
11801 GLEN WESSEX CT  
TAMPA, FL 33626 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:** MICHAEL DAVID RUMSEY

02/10/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                         |                 |                      |
|-----------------|-------------------------|-----------------|----------------------|
| Title           | MGR                     | Title           | AUTHORIZED MEMBER    |
| Name            | RUMSEY FAMILY TRUST     | Name            | RUMSEY, MICHAEL D    |
| Address         | 11801 GLEN WESSEX CT    | Address         | 11801 GLEN WESSEX CT |
| City-State-Zip: | TAMPA FL 32080          | City-State-Zip: | TAMPA FL 33626       |
|                 |                         |                 |                      |
| Title           | AMBR, AUTHORIZED MEMBER |                 |                      |
| Name            | RUMSEY, KAREN M         |                 |                      |
| Address         | 11801 GLEN WESSEX CT    |                 |                      |
| City-State-Zip: | TAMPA FL 33626          |                 |                      |

*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:** MICHAEL DAVID RUMSEY

MANAGER

02/10/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date