

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000131567

**Entity Name:** 32 BELOW HAWAIIAN SHAVE ICE LLC

**Current Principal Place of Business:**

1621 N. MONROE ST  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

7837 MACLEAN RD  
TALLAHASSEE, FL 32312

**FEI Number:** 84-2718547

**Certificate of Status Desired:** No

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

DENIS, TOMMY JR  
7837 MACLEAN RD  
TALLAHASSEE, FL 32312 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  
Name DENIS, TOMMY JR  
Address 7837 MACLEAN RD  
City-State-Zip: TALLAHASSEE FL 32312

*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:** DENIS, TOMMY, JR

**MANGER OWNER**

**03/20/2022**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date