

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000149872

**Entity Name:** SHADD, LLC

**Current Principal Place of Business:**

7833 RILEY RD  
SOUTHPORT, FL 32409

**Current Mailing Address:**

7833 RILEY RD  
SOUTHPORT, FL 32409 US

**FEI Number:** 84-2126521

**Certificate of Status Desired:** No

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

SAULS, MATT  
7833 RILEY RD  
SOUTHPORT, FL 32409 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 SAULS, MATT  
Address 7833 RILEY RD  
City-State-Zip: SOUTHPORT FL 32409

Title MGR  
Name HUMBLE, NICK  
Address 7833 RILEY RD  
City-State-Zip: SOUTHPORT FL 32409

Title MGR  
Name DUFRESNE, DOROTHY  
Address 7833 RILEY RD  
City-State-Zip: SOUTHPORT FL 32409

*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:** MATT SAULS

MANAGER

04/28/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date