

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000171832

Entity Name: FACCHINI INVESTMENTS PGA LLC

Current Principal Place of Business:

5538 P G A BLVD
UNIT 5033
ORLANDO, FL 32839

Current Mailing Address:

5753 HWY 85 NORTH
UNIT 5893
CRESTVIEW, FL 32536 US

FEI Number: 35-2667936

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
7901 4TH ST N
STE 300
ST PETERSBURG, FL 33702 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: KIRK SIMMONS

04/26/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | | | |
|-----------------|--------------------------------|-----------------|--------------------------------|
| Title | AMBR | Title | MGR |
| Name | FACCHINI, DANIEL H | Name | FACCHINI, MARIANO D |
| Address | 5753 HWY 85 NORTH UNIT 5893 | Address | 5753 HWY 85 NORTH UNIT 5893 |
| City-State-Zip: | CRESTVIEW FL 32536 | City-State-Zip: | CRESTVIEW FL 32536 |
| | | | |
| Title | MGR | | |
| Name | FACCHINI, GASTON DANIEL | | |
| Address | 5753 HWY 85 NORTH UNIT 5893 | | |
| City-State-Zip: | CRESTVIEW FL 32536 | | |

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: DANIEL FACCHINI

AMBR

04/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date