| 2024 ELODIDA LIMITED LIADU ITV COMDANV AMENDED ANNUAL DEDOD | - |
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| 2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPOR |   |
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### DOCUMENT# L19000253624

Entity Name: DH12841, LLC

### Current Principal Place of Business:

3032 VIA RIALTO ST. FORT MYERS, FL 33905

## **Current Mailing Address:**

3032 VIA RIALTO ST. FORT MYERS, FL 33905 US

## FEI Number: 86-1618374

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

MATTA, DANIELLE 3032 VIA RIALTO ST. FORT MYERS, FL 33905 US Certificate of Status Desired: No

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                     | E: DANIELLE MATTA                        |                 |                       | 04/13/2021 |  |  |
|-------------------------------|--|-----------------|-----------------------|------------|--|--|
|                               | Electronic Signature of Registered Agent |                 |                       | Date       |  |  |
| Authorized Person(s) Detail : |  |                 |                       |            |  |  |
| Title                         | AUTHORIZED MEMBER                        | Title           | AUTHORIZED MEMBER     |            |  |  |
| Name                          | MATTA, DANIELLE                          | Name            | MATTA, HAZEM          |            |  |  |
| Address                       | 3032 VIA RIALTO ST.                      | Address         | 3032 VIA RIALTO ST.   |            |  |  |
| City-State-Zip:               | FORT MYERS FL 33905                      | City-State-Zip: | FORT MYERS FL 33905   |            |  |  |
| Title                         | AUTHORIZED MEMBER                        | Title           | AUTHORIZED MEMBER     |            |  |  |
| Name                          | CAVANAUGH, JENNIFER                      | Name            | CAVANAUGH, JAMES      |            |  |  |
| Address                       | 4751 22ND ST SW                          | Address         | 4751 22ND ST SW       |            |  |  |
| City-State-Zip:               | LEHIGH ACRES FL 33973                    | City-State-Zip: | LEHIGH ACRES FL 33973 |            |  |  |
| Title                         | AUTHORIZED MEMBER                        |                 |                       |            |  |  |
| Name                          | SENGE, DANIEL                            |                 |                       |            |  |  |
| Address                       | 16545 CALISTOGA DR                       |                 |                       |            |  |  |
| City-State-Zip:               | BONITA SPRINGS FL 34135                  |                 |                       |            |  |  |
|                               |  |                 |                       |            |  |  |

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: JAMES CAVANAUGH

AUTHORIZED MEMBER 04/13/2021

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Apr 13, 2021 Secretary of State 9985118074CC