

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000060117

**Entity Name:** SECOND HANDLERS LLC

**Current Principal Place of Business:**

8886 SW 95 ST  
UNIT A  
OCALA, FL 34481

**Current Mailing Address:**

8886 SW 95 ST  
UNIT A  
OCALA, FL 34481

**FEI Number:** 84-4917005

**Certificate of Status Desired:** No

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

FINLEY, ANGIE  
8720 SW HWY 200 #7  
OCALA, FL 34481 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	Title	AMBR
Name	SIEGEL, LAWRENCE	Name	SIEGEL, PATRICIA
Address	8886 SW 95 ST UNIT A	Address	8886 SW 95 ST UNIT A
City-State-Zip:	OCALA FL 34481	City-State-Zip:	OCALA FL 34481

*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:** LAWRENCE SIEGEL

**PRES**

**02/28/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date