## **2022 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L20000161340

Entity Name: TROPICAL HOSPITALITY SERVICES LLC

**Current Principal Place of Business:** 

11045 LOST LAKE DR 210

NAPLES, FL 34105

**Current Mailing Address:** 

11045 LOST LAKE DR 210

NAPLES, FL 34105 US

FEI Number: 86-1564519 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHNSON, MATTHEW 11045 LOST LAKE DR 210 NAPLES, FL 34105 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: MATTHEW JOHNSON 10/10/2022

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title PARTNER

Name JOHNSON PARRA, LEONELA

Address 11045 LOST LAKE DR.

210

City-State-Zip: NAPLES FL 34105

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: LEONELA JOHNSON PARRA

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**OWNER** 

FILED Oct 10, 2022

**Secretary of State** 

3363691432CR

Date

10/10/2022