| Current Principal Place of Business: | |
|--------------------------------------|--|
| 2376 DEERCREEK BLVD | |
| SAINT CLOUD, FL 34772 | |
| | |
| Current Mailing Address: | |

2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

2376 DEERCREEK BLVD SAINT CLOUD, FL 34772 US

DOCUMENT# L20000167965

Entity Name: ALLIMART L.L.C.

FEI Number: 85-1584455

Name and Address of Current Registered Agent:

REPUBLIC REGISTERED AGENT LLC 1150 NW 72ND AVE TOWER I STE 455 MIAMI, FL 33126 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 | : WESLEY DOLAN | | | 10/17/2023 | |
|-------------------------------|--|-----------------|----------------------|------------|--|
| | Electronic Signature of Registered Agent | | | Date | |
| Authorized Person(s) Detail : | | | | | |
| Title | AMBR | Title | AMBR | | |
| Name | BARZEY, BRENT | Name | BAILEY, SHARI | | |
| Address | 2376 DEERCREEK BLVD | Address | 2376 DEERCREEK BLVD | | |
| City-State-Zip: | SAINT CLOUD FL 34772 | City-State-Zip: | SAINT CLOUD FL 34772 | | |

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 | BRENT BARZEY | MEMBER | 10/17/2023 |
|-----------|---|--------|------------|
| | Electronic Oliverture of Olivelia e Active sized Develop (a) Detail | | D / |

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date