

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000226979

**Entity Name:** FLORIDA PERMITTING AND SERVICES I LLC

**Current Principal Place of Business:**

1801 S TREASURE DR APT 224  
NORHT BAY VILLE, FL 33141

**Current Mailing Address:**

1801 S TREASURE DR APT 224  
NORHT BAY VILLE, FL 33141 US

**FEI Number:** 85-2385169

**Certificate of Status Desired:** No

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

MOREJON, ELIZABETH  
1801 S TREASURE DR APT 224  
NORHT BAY VILLE, FL 33141 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	AMBR	Title	MGR
Name	MOREJON, ELIZABETH	Name	LA FUENTE, DYRON
Address	1801 S TREASURE DR APT 224	Address	1801 S TREASURE DR APT 119
City-State-Zip:	NORHT BAY VILLE FL 33141	City-State-Zip:	NORHT BAY VILLE FL 33141

*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:** ELIZABETH MOREJON

**MGR**

**03/23/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date