

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000228400

**Entity Name:** 8392 IVY BROOK LLC

**Current Principal Place of Business:**

8392 IVY BROOK LANE  
TALLAHASSEE, FL 32312

**Current Mailing Address:**

23640 COUNTY ROAD 675  
MYAKKA CITY, FL 34251 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

PROKOP, ANNA D  
23640 COUNTY ROAD 675  
MYAKKA CITY, FL 34251 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  
Name PROKOP, ANNA D  
Address 23640 COUNTY ROAD 675  
City-State-Zip: MYAKKA CITY FL 34251

Title AMBR  
Name UCHMAN, ADAM  
Address 23640 COUNTY RD 675  
City-State-Zip: MYAKKA CITY FL 34251

Title AMBR  
Name UCHMAN, OLIVIA V  
Address 23640 COUNTY ROAD 675  
City-State-Zip: MYAKKA CITY FL 34251

Title AMBR  
Name UCHMAN, ALEXANDER W  
Address 23640 COUNTY ROAD 675  
City-State-Zip: MYAKKA CITY FL 34251

*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:** ANNA D PROKOP

**MANAGER**

**02/03/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date