

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000242305

**Entity Name:** STREAMLINE PT, LLC

**Current Principal Place of Business:**

4651 SALISBURY RD STE 250  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

4651 SALISBURY RD STE 250  
JACKSONVILLE, FL 32256 US

**FEI Number:** 85-2831493

**Certificate of Status Desired:** Yes

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

OLSON, DAVE  
241 ATLANTIC BLVD.  
NEPTUNE BEACH, FL 32266 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            VP OF FINANCE  
Name            KASSIRIS, RYAN  
Address        4651 SALISBURY RD STE 250  
City-State-Zip: JACKSONVILLE FL 32256

*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:** RYAN KASSIRIS

VP OF FINANCE

01/30/2024

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date