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: ANDREW L. MASSIAH

Electronic Signature of Signing Authorized Person(s) Detail

	Electronic Signature of Registered Agent			
Authorized Person(s) Detail :				
Title	MGR	Title	AMBR	
Name	MASSIAH, ANDREW	Name	MASSIAH, ANDREIA	
Address	3959 VAN DYKE RD SUITE 185	Address	3959 VAN DYKE RD SUITE 185	

City-State-Zip:

CEO

LUTZ FL 33558

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:

Current Principal Place of Business:

Entity Name: DEMERARA SYSTEMS LLC

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

1727 COACHMAN PLAZA DRIVE SUITE 214 CLEARWATER, FL 33759

DOCUMENT# L20000257101

Current Mailing Address:

3959 VAN DYKE ROAD SUITE 185 LUTZ, FL 33558

FEI Number: 85-2931577

Name and Address of Current Registered Agent:

REGISTERED AGENT INC. 7901 4TH ST N SUITE 300 ST. PETERSBURG, FL 33702 US

City-State-Zip: LUTZ FL 33558

FILED Mar 19, 2024

Secretary of State 4450324339CC

Certificate of Status Desired: Yes

03/19/2024

Date