

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000261206

**Entity Name:** P&T LIVING SOLUTIONS LLC

**Current Principal Place of Business:**

851 S STATE ROAD 434  
#316  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

3410 TRACELAND OAK LANE  
GREEN COVE SPRINGS, FL 32043 US

**FEI Number:** 85-2823736

**Certificate of Status Desired:** No

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

TELISNOR, ANDISON  
3410 TRACELAND OAK LANE  
GREEN COVE SPRINGS, FL 32043 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:** ANDISON TELISNOR

05/01/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGER	Title	MGR
Name	TELISNOR, ANDISON	Name	PAUL, SR., HERBANS
Address	3410 TRACELAND OAK LANE	Address	1162 SERENITY WAY
City-State-Zip:	GREEN COVE SPRINGS FL 32043	City-State-Zip:	IMMOKALEE FL 34142

*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:** ANDISON TELISNOR

MANAGER

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date