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: WILLIAM SYLVIA

Electronic Signature of Signing Authorized Person(s) Detail

OWNER

Certificate of Status Desired: No

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

Authorized Person(s) Detail :

Title MGR SYLVIA, WILLIAM J Name 403 CRAWFORD AVE Address City-State-Zip: NEW SMYRNA BEACH FL 32169

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000317345

Entity Name: SHARK BITE PROPERTY MANAGEMENT LLC

Current Principal Place of Business:

403 CRAWFORD AVE APT. C NEW SMYRNA BEACH, FL 32169

Current Mailing Address:

PO BOX 2522 NEW SMYRNA BEACH, FL 32170

FEI Number: 85-3521809

Name and Address of Current Registered Agent:

SYLVIA, WILLIAM J 403 CRAWFORD AVE С NEW SMYRNA BEACH, FL 32169 US

FILED Apr 18, 2023 Secretary of State 2332499764CC

04/18/2023

Date