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: ANN ALTMAN

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L20000319609

Entity Name: ALTMAN ANDERSON MOUNTAIN GETAWAY, LLC

Current Principal Place of Business:

2109 BAYSHORE BLVD UNIT 705 TAMPA, FL 33606

Current Mailing Address:

2109 BAYSHORE BLVD **UNIT 705** TAMPA, FL 33606 US

FEI Number: 85-3656169

Name and Address of Current Registered Agent:

ALTMAN, ANN 2109 BAYSHORE BLVD **UNIT 705** TAMPA, FL 33606 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

Authorized Person(s) Detail :

City-State-Zip: LARGO FL 33774

Title	MGR	Title	MGR
Name	ALTMAN, ANN	Name	ALTMAN, PETER
Address	2109 BAYSHORE BLVD	Address	6014 OAK RIDGE AVE
City-State-Zip:	UNIT 705 TAMPA FL 33606	City-State-Zip:	NEW PORT RICHEY FL 34653
Title	MGR		
Name	ANDERSON, JOAN A		
Address	10190 IMPERIAL POINT DRIVE WEST UNIT 6		

MANAGER 04/25/2023

Secretary of State 3924546320CC

FILED Apr 25, 2023

Certificate of Status Desired: No

Date

Date