

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000336288

**Entity Name:** ROTH REGIONAL LLC

**Current Principal Place of Business:**

165 SABAL PALM DR.  
111  
LONGWOOD, FL 32779

**Current Mailing Address:**

165 SABAL PALM DRIVE  
SUITE 111  
LONGWOOD, FL 32779 US

**FEI Number:** 85-3510284

**Certificate of Status Desired:** No

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

ROTHENBERG, AMANDA T  
605 NORTHLAKE BLVD  
51  
ALTAMONTE SPRINGS, FL 32701 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 MGR  
Name ROTHENBERG, AMANDA T  
Address 605 NORTHLAKE BLVD #51  
City-State-Zip: ALTAMONTE SPRINGS FL 32779

*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:** AMANDA ROTHENBERG

**OWNER**

**04/05/2023**

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

\_\_\_\_\_  
Date