

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000367084

**Entity Name:** 2306 MAKARIOS LLC

**Current Principal Place of Business:**

5330 A1A S  
ST. AUGUSTINE, FL 32080

**Current Mailing Address:**

5330 A1A S  
ST. AUGUSTINE, FL 32080

**FEI Number:** 85-4144537

**Certificate of Status Desired:** No

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

WILSON, PAULA  
5330 A1A S  
ST. AUGUSTINE, FL 32080 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 WILSON, PAULA  
Address 5330 A1A S  
City-State-Zip: ST. AUGUSTINE FL 32080

*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:** PAULA WILSON

**MANAGER**

**03/09/2023**

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

\_\_\_\_\_  
Date