

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000038703

Entity Name: 9605 S BUCKSKIN LLC

Current Principal Place of Business:

9605 S BUCKSKIN AVE
FLORAL CITY, FL 34436

Current Mailing Address:

PO BOX 266
LUTZ, FL 33548

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PETTIJOHN, ROBERT J
8223 E PONY LN
FLORAL CITY, FL 34436 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 PETTIJOHN, ROBERT
Address 8223 E PONY LN
City-State-Zip: FLORAL CITY FL 34436

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: ROBERT PETTIJOHN

MANAGER

04/11/2022

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date