# 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# L21000050864

### Entity Name: PERFECT SAR LLC

# Current Principal Place of Business:

424 NW 8TH AVE GAINESVILLE, FL 32601

# **Current Mailing Address:**

9889 GATE PARKWAY N STE 301 JACKSONVILLE, FL 32246 US

# FEI Number: 86-1989490

## Name and Address of Current Registered Agent:

LEMASTER, JOSH 9889 GATE PARKWAY N STE 301 JACKSONVILLE, FL 32246 US

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	Title	MGR
Name	LEMASTER, JOSH	Name	GOLF PLANNER PRO LLC
Address	9889 GATE PARKWAY N STE 301	Address	9889 GATE PARKWAY N STE 301
City-State-Zip:	JACKSONVILLE FL 32246	City-State-Zip:	JACKSONVILLE FL 32246

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: JOSH LEMASTER

MANAGER

07/12/2023 Date

Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jul 12, 2023 Secretary of State 8479641234CC