

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000125768

**Entity Name:** SS AND L NURSERY"LLC"

**Current Principal Place of Business:**

14529 BUNNY LANE  
LOXAHATCHEE GROVES, FL 33470

**Current Mailing Address:**

14529 BUNNY LANE  
LOXAHATCHEE GROVES, FL 33470

**FEI Number:** 86-3019064

**Certificate of Status Desired:** No

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

MILCENT, STENIO  
6165 ARCADE COURT  
LAKE WORTH, FL 33463 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:** STENIO MILCENT

05/01/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name MILCENT, LAUVANA  
Address 6165 ARCADE COURT  
City-State-Zip: LAKE WORTH FL 33463

Title MGR  
Name MILCENT, STENIO  
Address 6165 ARCADE COURT  
City-State-Zip: LAKE WORTH FL 33463

*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:** MILCENT, STENIO

MANAGER

05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date