SIGNATURE: PORT ORANGE MANAGEMENT LLC

that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

Current Principal Place of Business:

Entity Name: 13 PORT ORANGE LLC

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

7901 4TH ST N **STE 300** ST. PETERSBURG, FL 33702

DOCUMENT# L21000175216

Current Mailing Address:

5030 CHAMPION BLVD G11 #159 BOCA RATON, FL 33496 US

FEI Number: 86-3544185

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 7901 4TH ST N **STE 300** ST. PETERSBURG, FL 33702 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

Authorized	Person(s) Detail :
AdditionEcd	1 01 00 11(0	, Docum .

Title	AMBR	Title	AMBR
Name	PORT ORANGE MANAGEMENT LLC	Name	BERRI CAPITAL GROUP LLC
Address	30 N GOULD ST STE R	Address	5830 E 2ND ST, STE. 7000 #1591
City-State-Zip:	SHERIDAN WY 82801	City-State-Zip:	CASPER WY 82609
Title	AMBR	Title	AMBR
Title Name	AMBR CORANA ENTERPRISES LLC	Title Name	AMBR MARINER CAPITAL GROUP LLC
Name	CORANA ENTERPRISES LLC	Name	MARINER CAPITAL GROUP LLC

AUTHORIZED MEMBER

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

Certificate of Status Desired: No

02/21/2024 Date

Date