

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000207593

**Entity Name:** LONG LEAF FOODS HOLDINGS LLC

**Current Principal Place of Business:**

C/O BIG IDEA VENTURES LLC  
28 VALLEY RD SUITE 1  
MONTCLAIR, NJ 07042

**Current Mailing Address:**

C/O BIG IDEA VENTURES LLC  
28 VALLEY RD SUITE 1  
MONTCLAIR, NJ 07042 US

**FEI Number:** 86-3432034

**Certificate of Status Desired:** No

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

MASTROBUONI, THOMAS A  
C/O BIG IDEA VENTURES LLC  
28 VALLEY RD SUITE 1  
MONTCLAIR, FL 07042 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 AMBR  
Name IVE, ANDREW D  
Address C/O BIG IDEA VENTURES LLC  
28 VALLEY RD SUITE 1  
City-State-Zip: MONTCLAIR NJ 07042

Title AMBR  
Name MASTROBUONI, THOMAS A  
Address 38 WESTON STREET  
City-State-Zip: NUTLEY NJ 07110

Title AMBR  
Name BIG IDEA VENTURES LLC  
Address C/O BIG IDEA VENTURES LLC  
28 VALLEY RD SUITE 1  
City-State-Zip: MONTCLAIR NJ 07042

*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:** THOMAS A MASTROBUONI

**MANAGING MEMBER**

**04/01/2024**

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

\_\_\_\_\_  
Date