

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000220476

Entity Name: JUSTIN RODE PAINTING LLC

Current Principal Place of Business:

206 BROKEN BOW TRAIL
CRAWFORDVILLE, FL 32327

Current Mailing Address:

206 BROKEN BOW TRAIL
CRAWFORDVILLE, FL 32327

FEI Number: 59-5805923

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

RODE, JUSTIN L
206 BROKEN BOW TRAIL
CRAWFORDVILLE, FL 32327 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 SUPERVISOR
Name RODE, JUSTIN LEE
Address 206 BROKEN BOW TRAIL
City-State-Zip: CRAWFORDVILLE FL 32327

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: JUSTIN RODE

SUPERVISOR

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date