## **2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000291953

**Entity Name: RESPECTIVE LLC** 

**Current Principal Place of Business:** 

462 VENETIAN VILLA DRIVE NEW SMYRNA BEACH. FL 32168

**Current Mailing Address:** 

2035 PALMETTO STREET APT # 1L FLUSHING. NY 11385 US

FEI Number: 87-1368582 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MIGLIORANZI, CHRISTOPHER J 462 VENETIAN VILLA DRIVE NEW SMYRNA BEACH, FL 32168 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:

Name

Electronic Signature of Registered Agent

Date

FILED Feb 23, 2023

**Secretary of State** 

9695367358CC

Authorized Person(s) Detail:

Title MGR Title

MIGLIORANZI, CHRISTOPHER Name WADE, SIMON

Address 462 VENETIAN VILLA DRIVE Address 2035 PALMETTO STREET

APT 1L

AMBR

City-State-Zip: NEW SMYRNA BEACH FL 32168
City-State-Zip: FLUSHING NY 11385

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: SIMON WADE MEMBER 02/23/2023