

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000318208

**Entity Name:** KEVIN ROWE ENTERPRISES, LLC

**Current Principal Place of Business:**

369 SE 90TH STREET  
OCALA, FL 34480

**Current Mailing Address:**

369 SE 90TH STREET  
OCALA, FL 34480 US

**FEI Number:** 87-1630269

**Certificate of Status Desired:** No

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

ROWE, KEVIN  
369 SE 90TH STREET  
OCALA, FL 34480 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	MGR	Title	MGR
Name	ROWE, KEVIN	Name	ROWE, SHELBY
Address	369 SE 90TH STREET	Address	369 SE 90TH STREET
City-State-Zip:	OCALA FL 34480	City-State-Zip:	OCALA FL 34480

*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:** KEVIN ROWE

**MANAGER**

**02/10/2023**

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

\_\_\_\_\_  
Date