

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000333266

**Entity Name:** ATLANTIC CREAMERY OF PORT ORANGE LLC

**Current Principal Place of Business:**

4066 S. RIDGEWOOD AVE  
PORT ORANGE, FL 32127

**Current Mailing Address:**

4066 S. RIDGEWOOD AVE  
PORT ORANGE, FL 32127 US

**FEI Number:** 87-1802831

**Certificate of Status Desired:** Yes

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

ATLANTIC CREAMERY OF PORT ORANGE LLC  
4066 S. RIDGEWOOD AVE  
PORT ORANGE, FL 32127 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:** TIFFANY H JOLLEY

04/11/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AR	Title	AR
Name	JOLLEY, TIFFANY H	Name	WILLIAMS, SANDRA F
Address	815 HENSEL HILL RD W	Address	605 CALHOUN ST.
City-State-Zip:	PORT ORANGE FL 32127	City-State-Zip:	SOUTH DAYTONA FL 32119

*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:** TIFFANY JOLLEY

AR

04/11/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date