

**2022 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L21000426436

**Entity Name:** CASH OFFER FLORIDA, LLC

**Current Principal Place of Business:**

5259 SKYLARK CT  
CAPE CORAL, FL 33904

**Current Mailing Address:**

5259 SKYLARK CT  
CAPE CORAL, FL 33904 US

**FEI Number: 88-1002290**

**Certificate of Status Desired: No**

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

ELLIOTT, NORMAN  
4940 SOUTHFORK DR.  
LAKELAND, FL, FL 33813 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: NORMAN ELLIOTT**

**08/08/2022**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MEMBER  
Name ELLIOTT, NORMAN J IV  
Address 5259 SKYLARK CT  
City-State-Zip: CAPE CORAL FL 33904

*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: NORMAN ELLIOTT**

**MEMBER**

**08/08/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date