# 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L21000444664

#### Entity Name: DEMATTEOTLLC

### **Current Principal Place of Business:**

2400 BRIDGEPORT CIRCLE ROCKLEDGE, FL 32955

#### **Current Mailing Address:**

PO BOX 540924 MERRITT ISLAND, FL 32953 US

# FEI Number: APPLIED FOR

## Name and Address of Current Registered Agent:

DEMATTEO, TRAVIS 2400 BRIDGEPORT CIRCLE ROCKLEDGE, FL 32955 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

### Authorized Person(s) Detail :

Title	MR
Name	DEMATTEO, TRAVIS
Address	2400 BRIDGEPORT CIRCLE
City-State-Zip:	ROCKLEDGE FL 32955

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: TRAVIS DEMATTEOT

OWNER

09/23/2022 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Sep 23, 2022 Secretary of State 3434376586CC

Certificate of Status Desired: Yes

Date