| Current Ma | ling Address: | | | |
|--|--|-----------------|-----------------------------------|------|
| 857 IVORY HAVERHILL | LANE ., FL 33415 | | | |
| FEI Number: 21-0004583 | | | Certificate of Status Desired: No | |
| Name and Address of Current Registered Agent: | | | | |
| PEREZ, RAFAEL 857 IVORY LANE HAVERHILL, FL 33415 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: RAFAEL- PEREZ 02/20/20 | | | | |
| | Electronic Signature of Registered Agent | | | Date |
| Authorized Person(s) Detail : | | | | |
| Title | MGR | Title | VICE PRESIDENT | |
| Name | PEREZ, RAFAEL | Name | PEREZ, NORMA | |
| Address | 857 IVORY LANE | Address | 3691 TAMIAMI TRAIL | |
| City-State-Zip: | HAVERHILL FL 33415 | City-State-Zip: | PORT CHAROLETTE FL 33952 | |
| Title | SECRETARY | | | |
| Name | HERNANDEZ, JENNIFER | | | |
| Address | 3691 TAMIAMI TRAIL | | | |
| City-State-Zip: | PORT CHAROLETTE FL 33952 | | | |
| | | | | |

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.

DIRECTOR

SIGNATURE: PEREZ RAFAEL

Electronic Signature of Signing Authorized Person(s) Detail

02/20/2023

Date

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000458366

Entity Name: 3691 TAMIAMI TRAIL LLC

Current Principal Place of Business:

3691 TAMIAMI TRAIL PORT CHAROLETTE, FL 33952

Current Mailing Address:

Feb 20, 2023 Secretary of State 8137119480CC

FILED