that my name a	ppears above, or on a	n attachment with al	l other like	emp	owere	ed.		
SIGNATU	JRE: BRYAN	AND MICHE	ELLE P	ΠC	CA	RI	MANAGING MEMBER - AMBR	03/31/2022

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

Electronic Signature of Signing Authorized Person(s) Detail

3046 SUTTON WOODS DRIVE PLANT CITY, FL 33566

Current Principal Place of Business:

Current Mailing Address:

3046 SUTTON WOODS DRIVE PLANT CITY, FL 33566

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

PICCARI, MICHELLE A 3046 SUTTON WOODS DRIVE PLANT CITY, FL 33566 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	AMBR	Title	AMBR
Name	PICCARI, MICHELLE A	Name	PICCARI, BRYAN D
Address	3046 SUTTON WOODS DRIVE	Address	3046 SUTTON WOODS DRIVE
City-State-Zip:	PLANT CITY FL 33566	City-State-Zip:	PLANT CITY FL 33566

Entity Name: BRYAN D. PICCARI AND MICHELLE A. PICCARI, LLC

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L21000499968

Date

FILED Mar 31, 2022 Secretary of State 7937934479CC

Certificate of Status Desired: No

Date