

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000029580

**Entity Name:** THE GREENERY FLORAL & TUXEDO PLACE TALLAHASSEE  
LLC

**FILED**  
**Apr 29, 2024**  
**Secretary of State**  
**3958134036CC**

**Current Principal Place of Business:**

608-2 RAILROAD SQ  
TALLAHASSEE, FL 32310

**Current Mailing Address:**

PO BOX 565  
QUINCY, FL 32353 US

**FEI Number: 87-4673091**

**Certificate of Status Desired: No**

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

GREEN, RONTERIOUS T  
1715 W. JEFFERSON ST  
QUINCY, FL 32351 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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title	AMBR	Title	MGR
Name	GREEN, RONTERIOUS	Name	WHITFIELD, RA'SHANA
Address	1715 W. JEFFERSON ST	Address	810 S LINCOLN ST
City-State-Zip:	QUINCY FL 32351	City-State-Zip:	QUINCY FL 32351

Title AMBR  
Name KEYES, TERRY  
Address 810 S LINCOLN ST  
City-State-Zip: QUINCY FL 32351

*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: RONTERIOUS T GREEN**

**AMBR**

**04/29/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date