

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000055776

**Entity Name:** LIVING2GIVE.LLC

**Current Principal Place of Business:**

1701 SAN PABLO ROAD SOUTH  
619  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

1701 SAN PABLO ROAD SOUTH  
619  
JACKSONVILLE, FL 32224

**FEI Number:** 88-0677047

**Certificate of Status Desired:** No

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

KARA, VICTORIA  
1701 SAN PABLO ROAD SOUTH  
619  
JACKSONVILLE, FL 32224 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 AP  
Name SIRBILADZE, RENATA  
Address 1701 SAN PABLO ROAD SOUTH, APT  
619  
City-State-Zip: JACKSONVILLE FL 32224

*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:** RENATA SIRBILADZE

AP

01/29/2023

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

\_\_\_\_\_  
Date