

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000138715

Entity Name: POSH PAW LLC

Current Principal Place of Business:

16443 MAGNOLIA BLUFF DR
MONTVERDE, FL 34756

Current Mailing Address:

16443 MAGNOLIA BLUFF DR
MONTVERDE, FL 34756

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PERGRAM, KIERA A
16443 MAGNOLIA BLUFF DR
MONTVERDE, FL 34756 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 | AR | Title | AR |
| Name | PERGRAM, KIERA A | Name | PERGRAM, MICAH J |
| Address | 16443 MAGNOLIA BLUFF DR | Address | 16443 MAGNOLIA BLUFF DR |
| City-State-Zip: | MONTVERDE FL 34756 | City-State-Zip: | MONTVERDE FL 34756 |

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: KIERA PERGRAM

OWNER

04/10/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date