

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000161830

**Entity Name:** ARGENBRIGHT HR , LLC

**Current Principal Place of Business:**

1100 BOLTON RD.  
NEW SMYRNA BEACH, FL 32168

**Current Mailing Address:**

1100 BOLTON RD.  
NEW SMYRNA BEACH, FL 32168 US

**FEI Number: 88-1828459**

**Certificate of Status Desired: No**

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

ARGENBRIGHT, CHARLES G  
1100 BOLTON RD.  
NEW SMYRNA BEACH, FL 32168 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	MGR	Title	MGR
Name	ARGENBRIGHT, CHARLES G	Name	ARGENBRIGHT, SHERRY S
Address	1100 BOLTON RD.	Address	1100 BOLTON RD.
City-State-Zip:	NEW SMYRNA BEACH FL 32168	City-State-Zip:	NEW SMYRNA BEACH FL 32168

*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: CHARLES ARGENBRIGHT**

**MGR**

**01/30/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date