

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000242642

Entity Name: PLUSH TRANSPORTATION LLC**Current Principal Place of Business:**7867 BRIDGESTONE DRIVE
ORLANDO, FL 32835**Current Mailing Address:**7867 BRIDGESTONE DRIVE ORLANDO FL.
ORLANDO, FL 32835 UN**FEI Number:** 92-2903357**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAMS, EVERTON P
7867 BRIDGESTONE DRIVE
ORLANDO, FL 32835 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
Name WHITE-WILLIAMS, ENID L
Address 7867 BRIDGESTONE DRIVE
City-State-Zip: ORLANDO FL 32835

Title AMBR
Name WILLIAMS, RASHEEDI A
Address 7867 BRIDGESTONE DRIVE
City-State-Zip: ORLANDO FL 32835

Title AMBR
Name WILLIAMS, MALIK T
Address 7867 BRIDGESTONE DRIVE
City-State-Zip: ORLANDO FL 32835

Title AMBR
Name WILLIAMS, KHALFANI R
Address 7867 BRIDGESTONE DRIVE
City-State-Zip: ORLANDO FL 32835

Title AMBR
Name WILLIAMS, JAHEIM K
Address 7867 BRIDGESTONE DRIVE ORLANDO
FL.
City-State-Zip: ORLANDO FL 32835

Title AMBR
Name WILLIAMS, JELANI A
Address 7867 BRIDGESTONE DRIVE
City-State-Zip: ORLANDO FL 32835

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: RASHEEDI A WILLIAMS**MEMBER****04/28/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date