

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000359006

Entity Name: RESPOKE LLC

Current Principal Place of Business:

411 WALNUT STREET
10971
GREEN COVE SPRINGS, FL 32043

Current Mailing Address:

411 WALNUT STREET
10971
GREEN COVE SPRINGS, FL 32043

FEI Number: 88-3928636

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NRAI SERVICES, INC
1300 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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
Name BARTICK, CHRIS
Address 411 WALNUT STREET, SUITE 10971
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title CO-OWNER
Name TONELLO, MICHAEL
Address P O BOX 1907
City-State-Zip: PROVINCETOWN MA 02657

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: MICHAEL TONELLO

CO-OWNER

02/09/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date