

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000360489

**Entity Name:** MAILBOX MONEY TEAM LLC

**Current Principal Place of Business:**

1403 DUNN AVE.  
STE. 2 #295  
JACKSONVILLE, FL 32218

**Current Mailing Address:**

1403 DUNN AVE.  
STE. 2 #295  
JACKSONVILLE, FL 32218 US

**FEI Number:** 88-4024160

**Certificate of Status Desired:** No

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

BRYANT TAYLOR LAW, PLLC  
261 N UNIVERSITY DR  
STE 500  
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 AM  
Name MCABEE, LARRY  
Address 1403 DUNN AVE. STE. 2 #295  
City-State-Zip: JACKSONVILLE FL 32218

Title AM  
Name MCABEE, KRISTIN  
Address 1403 DUNN AVE. STE. 2 #295  
City-State-Zip: JACKSONVILLE FL 32218

Title MGR  
Name THE MCABEE FAMILY TRUS  
Address 1403 DUNN AVE.  
STE. 2 #295  
City-State-Zip: JACKSONVILLE FL 32218

*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:** LARRY MCABEE

AM

03/16/2023

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

\_\_\_\_\_  
Date