

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000405503

**Entity Name:** TEASPOONS BAKERY LLC

**Current Principal Place of Business:**

5136 RAVENA AVE W  
SAINT CLOUD, FL 34771

**Current Mailing Address:**

5136 RAVENA AVE W  
SAINT CLOUD, FL 34771 US

**FEI Number:** 92-0472290

**Certificate of Status Desired:** No

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

RICHARDSON, EMILY  
5136 RAVENA AVE W  
SAINT CLOUD, FL 34771 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	Title	AMBR
Name	RICHARDSON, EMILY	Name	RICHARDSON, CODY
Address	5136 RAVENA AVE W	Address	5136 RAVENA AVE W
City-State-Zip:	SAINT CLOUD FL 34771	City-State-Zip:	SAINT CLOUD FL 34771

*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:** EMILY RICHARDSON

AMBR

03/28/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date