

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000483012

**Entity Name:** TPI-FMB SUITES, LLC

**Current Principal Place of Business:**

103 15TH AVENUE NW - SUITE #200  
WILLMAR, MN 56201

**Current Mailing Address:**

103 15TH AVENUE NW - SUITE #200  
WILLMAR, MN 56201 US

**FEI Number:** 92-1313183

**Certificate of Status Desired:** No

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

DENTI, KEVIN A ESQUIRE  
2180 IMMOKALEE ROAD - SUITE #316  
NAPLES, FL 34110 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 TORGERSON, THOMAS R  
Address 301 PALERMO CIRCLE  
City-State-Zip: FORT MYERS BEACH FL 33931

*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:** THOMAS TORGERSON

**PARTNER**

**04/21/2023**

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

\_\_\_\_\_ Date