

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000044050

**Entity Name:** TRUSTY LLC

**Current Principal Place of Business:**

11416 SATIRE ST  
ORLANDO, FL 32832

**Current Mailing Address:**

11416 SATIRE ST  
ORLANDO, FL 32832 US

**FEI Number:** 32-0717608

**Certificate of Status Desired:** No

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

CORREA, PAOLA  
11416 SATIRE ST  
ORLANDO, FL 32832 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 CORREA, PAOLA  
Address 11416 SATIRE ST  
City-State-Zip: ORLANDO FL 32832

Title AMBR  
Name CORREA, CARWIN  
Address 11416 SATIRE ST  
City-State-Zip: ORLANDO FL 32832

Title AMBR  
Name CORREA, WILLIAM  
Address 11416 SATIRE ST  
City-State-Zip: ORLANDO FL 32832

Title AMBR  
Name FLORES, FRANCISCO  
Address 11416 SATIRE ST  
City-State-Zip: ORLANDO FL 32832

Title AMBR  
Name RAMBHAROSE, NARESH  
Address 10448 109TH ST S  
City-State-Zip: RICHMOND HL NY 11419

*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:** CORREA , PAOLA

AMBR

04/01/2024

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

\_\_\_\_\_  
Date