

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000137462

Entity Name: VON VINTACHIC, LLC

Current Principal Place of Business:

1317 EDGEWATER DR.
SUITE 5034
ORLANDO, FL 32804

Current Mailing Address:

1317 EDGEWATER DR.
SUITE 5034
ORLANDO, FL 32804 US

FEI Number: 92-3136519

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HURST, EVONNE N
1317 EDGEWATER DR.
SUITE 5034
ORLANDO, FL 32804 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 | CEO | Title | AUTHORIZED REPRESENTATIVE |
| Name | HURST, EVONNE N | Name | HURST, ISAIAH R |
| Address | 1317 EDGEWATER DR. SUITE 5034 | Address | 1317 EDGEWATER DR. SUITE 5034 |
| City-State-Zip: | ORLANDO FL 32804 | City-State-Zip: | ORLANDO FL 32804 |
| Title | AUTHORIZED REPRESENTATIVE | | |
| Name | STANDLEY, NIA K | | |
| Address | 1317 EDGEWATER DR. SUITE 5034 | | |
| City-State-Zip: | ORLANDO FL 32804 | | |

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: EVONNE N. HURST

CEO

05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date