

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000312857

**Entity Name:** PLENTID LLC

**Current Principal Place of Business:**

6218 E 14TH AVENUE  
OFFICE # 8  
TAMPA, FL 33619

**Current Mailing Address:**

6218 E 14TH AVENUE  
OFFICE # 8  
TAMPA, FL 33619

**FEI Number:** 35-2784613

**Certificate of Status Desired:** No

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

DE SIMONE, ARIEL A  
6218 E 14TH AVENUE  
OFFICE # 8  
TAMPA, FL 33619 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 DE SIMONE, ARIEL A  
Address 6218 E 14TH AVENUE OFFICE # 8  
City-State-Zip: TAMPA FL 33619

Title MGR  
Name DE SIMONE, MAURO JAVIER  
Address AVENIDA VERGARA 1531  
PISO 1, DEPTO 2  
City-State-Zip: VILLA TESEI BUENOS AIRES 1688

*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:** ARIEL A DE SIMONE

**MGR**

**01/25/2024**

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

\_\_\_\_\_  
Date