

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000424232

Entity Name: BLACK HORSE PILL LLC

Current Principal Place of Business:

5210 ASHWOOD PLACE
ORLANDO, FL 32808

Current Mailing Address:

4102 VILABELLA DR
SEBRING, FL 33872 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TSAKIRIDIS, IASON I
4102 VILABELLA DR
SEBRING, FL 33872 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 AR
Name TSAKIRIDIS, IASON I
Address 4102 VILABELLA DR
City-State-Zip: SEBRING FL 33872

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: IASON TSAKIRIDIS

PRESIDENT

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date