

**2024 FOREIGN LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B19000000184

**Entity Name:** ANDBEST MANAGEMENT LP

**Current Principal Place of Business:**

11250 OLD ST AUGUSTINE RD 15-174  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

11250 OLD ST AUGUSTINE RD 15-174  
JACKSONVILLE, FL 32257 US

**FEI Number:** 45-1780211

**Certificate of Status Desired:** No

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

PARACORP INCORPORATED  
155 OFFICE PLAZA DRIVE, 1ST FLOOR  
TALLAHASSEE, FL 32301 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

**General Partner Detail :**

Document #

Name AND B.S. LLC

Address 11250 OLD ST AUGUSTINE RD 15-174

City-State-Zip: JACKSONVILLE FL 32257

*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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JENNIFER ANDERSON

**PARTNER**

**04/16/2024**

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date