LIMITED LIABILITY COMPANY ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS				FILED 98 HAY II PH 12: 55			
\$ 188. 1. Name s	Annual Report \$100.00 + \$88.75 Make Check Payable To: FLOR and Mailing Address ed Liability Company DOCUMENT	IDA DEPARTMEN	T OF STATE	SECRE TALLAI	TARY ()FHASSEE, F	FLORIDA	
ORMINN WEST, L.C. 6101 SABAL HAMMOCK CIR. PT. ORANGE FL 32124				6101 SABAL HAMMOCK CIR: PT. ORANGE FL 32124			
Sulte, Apr.	Southwest Blvd. 60 #. etc. Suite, Al City & S	ot. #, etc.	1 p.	3. Date Organized 04/14/19 4. FEI Number 59-344 5. Date of Last Re	197 4664	FL 6. Certificate of F	Applied For Not Applicable of Status Desired
321			SA			\$8.75 Additiona	Fee Required
	7. Name and Address of Current Registered	d Agent	Name	Name and Address	of New Regist	tered Agent/Of	fice
6101	NGER, STEVEN W SABAL HAMMOCK CIR. DRANGE FL 32124		Street Address (P	O. Box Number is	Not Acceptabl	le)	
ET.	MANGE FE SZIZ4		Suite, Apt. #, etc.				
r. (NAME FE SEIZE		Suite, Apt. #, etc.			Zip Code	
9. Pursua	nt to the provisions of Sections 608,416 and 608,506	3, Florida Statutes, the a	City bove-named limited	liability company sub	FL omits this state	ment for the pur	pose of changing
9. Pursual		3, Florida Statutes, the a orida. Such change was a	City bove-named limited	liability company sub	mits this state	ment for the pur	pose of changing I the appointmen
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Daytime Phone #