

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000009547

Entity Name: LESLIE L. FLAGE, LLC

Current Principal Place of Business:

9200 NW 36TH PLACE
SUITE A
GAINESVILLE, FL 32606

Current Mailing Address:

P O BOX 907
ALACHUA, FL 32616

FEI Number: 51-0497225

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DEEGAN, TIMOTHY P
9200 NW 36TH PLACE
SUITE A
GAINESVILLE, FL 32606 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 FLAGE, LESLIE L
Address P O BOX 907
City-State-Zip: ALACHUA FL 32616

Title MGRM
Name FLAGE, LESLIE L
Address P O BOX 907
City-State-Zip: ALACHUA FL 32616

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: LESLIE L. FLAGE

MGR

02/02/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date