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: MARIA P HAYES

Electronic Signature of Signing Authorized Person(s) Detail

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: MARIA P HAYES

Authorized Person(s) Detail :				
Title	Р	Title	DIRECTOR	
Name	HAYES, MARIA P	Name	HAYES, KERRY B	
Address	4780 22ND STREET N.E.	Address	4780 22ND STREET NE	
City-State-Zip:	NAPLES FL 34120	City-State-Zip:	NAPLES FL 34120	

Authorized Person(s) Detail :				
Title	Р	Title	DIRECTOR	
lame	HAYES, MARIA P	Name	HAYES, KERRY B	
Address	4780 22ND STREET N.E.	Address	4780 22ND STREET NE	
City-State-Zin	NAPLES EL 34120	Citv-State-Zip:	NAPLES FL 34120	

Name and Address of Current Registered Agent:

HAYES, MARIA P 4780 22ND STREET NE

NAPLES, FL 34120 US

4780 22ND STREET NE

FEI Number: 20-4274015

Electronic Signature of Registered Agent

4780 22ND STREET N.E. NAPLES, FL 34120 US

NAPLES, FL 34120

Current Mailing Address:

DOCUMENT# L04000089583

Entity Name: MARIA P. HAYES, C.P.A. & ASSOCIATES, PLLC

Current Principal Place of Business:

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 05, 2024 Secretary of State 0252696810CC

02/05/2024 Date

Certificate of Status Desired: No

PRESIDENT

Date