

2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000044552

Entity Name: PLAQUE BUSTER LLC**Current Principal Place of Business:**3206 HILLTOP LN
LARGO, FL 33770**Current Mailing Address:**2840 WEST BAY DR
PMB 134
BELLEAIR BLUFFS , FL 33770 US**FEI Number:** 43-2077464**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHICLES, ARIANE
2840 WEST BAY DR
PMB 134
BELLEAIR BLUFFS , FL 33770 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:** ARIANE CHICLES

12/03/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MANAGER
Name	CHICLES, ARIANE
Address	2840 WEST BAY DR PMB 134
City-State-Zip:	BELLEAIR BLUFFS FL 33770

Title	MANAGER
Name	NOWLING, PENELOPE
Address	2840 WEST BAY DR PMB 134
City-State-Zip:	BELLEAIR BLUFFS FL 33770

Title	AUTHORIZED MEMBER
Name	NOWLING, ANASTASIA
Address	2840 WEST BAY DR PMB 134
City-State-Zip:	BELLEAIR BLUFFS FL 33770

Title	AUTHORIZED MEMBER
Name	NOWLING, PHILLIP
Address	2840 WEST BAY DR PMB 134
City-State-Zip:	BELLEAIR BLUFFS FL 33770

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: PENELOPE NOWLING

MANAGER PARTNER

12/03/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date