

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000067409

Entity Name: DLF PACKING LLC**Current Principal Place of Business:**150 N GRAVES ROAD
FT. PIERCE, FL 34945**Current Mailing Address:**150 NORTH GRAVES ROAD
FT. PIERCE, FL 34945 US**FEI Number:** 26-3030403**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HENDERSON, STEVE L
COLLINS BROWN CALDWELL ET AL
756 BEACHLAND BOULEVARD
VERO BEACH, FL 32963 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 | FEEK, DOUGLAS L |
| Address | 160 44TH TERRACE SW |
| City-State-Zip: | VERO BEACH FL 32968 |

| | |
|-----------------|---------------------|
| Title | MGR |
| Name | FEEK, MELANIE B |
| Address | 160 44TH TERRACE SW |
| City-State-Zip: | VERO BEACH FL 32968 |

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: MELANIE FEEK

MGR

01/27/2023

Electronic Signature of Signing Authorized Person(s) Detail_____
Date