

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000109352

Entity Name: DEVILLE MILLER, LLC**Current Principal Place of Business:**10120 SABAL PALM AVENUE
CORAL GABLES, FL 33156**Current Mailing Address:**PO BOX 145058
CORAL GABLES, FL 33114 US**FEI Number:** 26-3896084**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DEVILLE, PHILIP R
10120 SABAL PALM AVENUE
CORAL GABLES, FL 33156 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	MGRM
Name	DEVILLE, PHILIP R
Address	10120 S.W. 55TH AVENUE
City-State-Zip:	CORAL GABLES FL 33159

Title	MGR
Name	HERZOG, RONALD E
Address	PO BOX 145058
City-State-Zip:	CORAL GABLES FL 33114-5058

Title	MGR
Name	DEVILLE, VALERIE A
Address	10120 S.W. 55TH AVENUE
City-State-Zip:	CORAL GABLES FL 33159

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: PHILIP R DEVILLE

MGRM

01/28/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date