

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000003922

**Entity Name:** CONSOLIDATED NURSERIES, LLC

**Current Principal Place of Business:**

3300 HENDERSON BLVD., STE. 105  
TAMPA, FL 33609

**Current Mailing Address:**

3300 HENDERSON BLVD., STE. 105  
TAMPA, FL 33609

**FEI Number:** 26-4042321

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RODRIGUEZ, STEPHANIE CFO  
3300 HENDERSON BLVD., STE. 105  
TAMPA, FL 33609 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:** STEPHANIE RODRIGUEZ

02/08/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRES  
Name            RODRIGUEZ, CY  
Address        3300 HENDERSON BLVD., STE. 105  
City-State-Zip: TAMPA FL 33609

Title            CFO  
Name            RODRIGUEZ, STEPHANIE  
Address        3300 HENDERSON BLVD., STE. 105  
City-State-Zip: TAMPA FL 33609

*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:** STEPHANIE RODRIGUEZ

CFO

02/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date