

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000053523

**Entity Name:** ORTIZ PLANNING SOLUTIONS LLC

**Current Principal Place of Business:**

2810 CENTRAL AVE  
B  
TAMPA , FL 33602

**Current Mailing Address:**

2810 N CENTRAL AVE  
B  
TAMPA, FL 33602 US

**FEI Number:** 27-0519244

**Certificate of Status Desired:** No

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

ORTIZ, PATRICIA A  
2810 CENTRAL AVE  
B  
TAMPA , FL 33602 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 ORTIZ, PATRICIA A  
Address 2810 B NORTH CENTRAL AVE  
APARTMENT B  
City-State-Zip: TAMPA FL 33602

Title TRUSTEE  
Name SETTLE, PAMELA JEAN  
Address 2810 CENTRAL AVE  
B  
City-State-Zip: TAMPA FL 33602

Title CO-TRUSTEE  
Name KATHY BYERS  
Address 2810 CENTRAL AVE  
B  
City-State-Zip: TAMPA FL 33602

*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:** PATRICIA ORTIZ

MGR

02/12/2025

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date