

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000121869

**Entity Name:** 49 CASSETA ROAD LLC

**Current Principal Place of Business:**

11180 ALPHARETTA HWY.  
ROSWELL, GA 30076

**Current Mailing Address:**

11180 ALPHARETTA HWY.  
ROSWELL, GA 30076 US

**FEI Number:** 27-1624109

**Certificate of Status Desired:** No

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

KEETER, DAREN M  
62 MAIN STREET 2B  
611086  
ROSEMARY BEACH, FL 31461 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 NEW PROVIDENCE MANAGEMENT  
LLC  
Address 11180 ALPHARETTA HWY.  
City-State-Zip: ROSWELL GA 30076

*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:** DAREN KEETER

**MANAGER**

**01/28/2023**

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

\_\_\_\_\_  
Date