

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000067845

**Entity Name:** ANTOWAN LATARVIS BYRD LLC

**Current Principal Place of Business:**

2016 S ADAMS ST  
A  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

6093 STONELER RD  
TALLAHASSEE, FL 32303 US

**FEI Number:** 32-0317709

**Certificate of Status Desired:** No

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

BYRD, ANTOWAN  
2016 S ADAMS ST  
A  
TALLAHASSEE, FL 32301 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:** ANTOWAN BYRD

04/14/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name BYRD, ANTOWAN  
Address 6093 STONELER RD  
City-State-Zip: TALLAHASSEE FL 32303

*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:** ANTOWAN BYRD

OWNER/MANAGER

04/14/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date