

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000115610

**Entity Name:** BANK REMOTE, L.L.C.

**Current Principal Place of Business:**

3520 THOMASVILLE ROAD  
SUITE 200  
TALLAHASSEE, FL 32309

**Current Mailing Address:**

3520 THOMASVILLE ROAD  
SUITE 200  
TALLAHASSEE, FL 32309 US

**FEI Number:** 27-3865904

**Certificate of Status Desired:** No

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

CURETON, BRYAN  
3520 THOMASVILLE ROAD  
SUITE 200  
TALLAHASSEE, FL 32309 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 PARKER, ROBERT B  
Address 3520 THOMASVILLE ROAD  
SUITE 200  
City-State-Zip: TALLAHASSEE FL 32309

Title MGRM  
Name CURETON, BRYAN  
Address 3520 THOMASVILLE ROAD  
SUITE 200  
City-State-Zip: TALLAHASSEE FL 32309

*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:** ROBERT PARKER

**OWNER**

**01/24/2023**

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

\_\_\_\_\_  
Date