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

SIGNATURE: DAVID REED

MANAGER

04/17/2023

Current Mailing Address:

1414 W SWANN AVE SUITE 100 TAMPA, FL 33606 US

DOCUMENT# L11000072747

1414 W SWANN AVE

SUITE 100 TAMPA, FL 33606

FEI Number: 45-2620963

Name and Address of Current Registered Agent:

Entity Name: CATALINA ENTERPRISES, LLC

Current Principal Place of Business:

MCNAMARA, THOMAS P 2907 BAY TO BAY BLVD., SUITE201 TAMPA, FL 33629 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

Authorized Person(s) Detail :

| Title | MGR | Title | MGR |
|-----------------|-------------------|-----------------|----------------------|
| Name | REED, DAVID H | Name | REED, CHRISTOPHER A |
| Address | 1210 S DRUID LANE | Address | 616 BROOKWOOD COURT |
| City-State-Zip: | TAMPA FL 33629 | City-State-Zip: | PONTE VEDRA FL 32082 |

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 17, 2023 Secretary of State 6173494736CC

Date

Certificate of Status Desired: No

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

that my name appears above, or on an attachment with all other like empowered.

Date