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: GARY ROBINSON

Electronic Signature of Signing Authorized Person(s) Detail

8108 NW 66 TERRACE TAMARAC. FL 33321 US

Name and Address of Current Registered Agent:

ROBINSON, GARY 9108 NW 66TH TERRACE TAMARAC, FL 33321 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: GARY ROBINSON

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title MGR Name ROBINSON, GARY Address 8108 NW 66 TERRACE City-State-Zip: TAMARAC FL 33321

Certificate of Status Desired: Yes

FILED Mar 02, 2023 Secretary of State 1568311305CC

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000081718

Entity Name: ROBINSON & COMPANY OF SOUTH FLORIDA, LLC

Current Principal Place of Business:

8108 NW 66 TERRACE TAMARAC, FL 33321

Current Mailing Address:

FEI Number: 45-2750724

MANAGING PARTNER

03/02/2023 Date

03/02/2023 Date