

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000138406

**Entity Name:** MOUNTAIN MANAGEMENT AND CONSULTING COMPANY LLC

**FILED**  
**Feb 15, 2023**  
**Secretary of State**  
**6125773811CC**

**Current Principal Place of Business:**

3705 SW 27TH ST  
223  
GAINESVILLE, FL 32608

**Current Mailing Address:**

857 COTHRAN ROAD  
INMAN, SC 29349 US

**FEI Number: 06-1662129**

**Certificate of Status Desired: No**

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

VERRANDO-HIGGINS, MARY  
3705 SW 27TH ST  
223  
GAINESVILLE, FL 32608 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 VERRANDO-HIGGINS, MARY  
Address 857 COTHRAN ROAD  
City-State-Zip: INMAN SC 29349

Title MGRM  
Name HIGGINS, ROBERT  
Address 857 COTHRAN ROAD  
City-State-Zip: INMAN SC 29349

Title MANAGER  
Name HIGGINS, IAN ROBERT  
Address 3705 SW 27TH ST  
223  
City-State-Zip: GAINESVILLE FL 32608

*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: MARY VERRANDO-HIGGINS**

**MANAGING PARTNER**

**02/15/2023**

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

\_\_\_\_\_  
Date