

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000055116

**Entity Name:** VOIP3.COM LLC

**Current Principal Place of Business:**

1700 S DIVISION AVE  
ORLANDO, FL 32805

**Current Mailing Address:**

PO BOX 618381  
ORLANDO, FL 32861

**FEI Number:** 45-5082611

**Certificate of Status Desired:** No

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

RYEL, SCOTT  
1700 S DIVISION AVE  
ORLANDO, FL 32805 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	Title	MGRM
Name	RYEL, SCOTT	Name	RYEL, AARON DAVID
Address	1700 S DIVISION AVE	Address	1700 S DIVISION AVE
City-State-Zip:	ORLANDO FL 32805	City-State-Zip:	ORLANDO FL 32805

*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:** SCOTT RYEL

**MANAGING MEMBER**

**04/18/2024**

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

\_\_\_\_\_  
Date