rrent Mailing Address:	
) BOX 5158 MOKALEE, FL 34143	
l Number: 46-1670796	Certificate of Status Desired: No

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

GSK REGISTERED AGENTS, INC. 1380 ROYAL PALM SQUARE BLVD. FORT MYERS, FL 33919 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	E: BRUCE GREEN			03/01/2023	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MGR	Title	MGR		
Name	HOWELL, KAREN E	Name	HOWELL, JAMES P		
Address	PO BOX 5158	Address	PO BOX 5158		
City-State-Zip:	IMMOKALEE FL 34143	City-State-Zip:	IMMOKALEE FL 34143		

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: KAREN E. HOWELL

MGR

03/01/2023 Date

Electronic Signature of Signing Authorized Person(s) Detail

# 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L12000161039

Entity Name: HOWELL-ROBERTS, LLC

### **Current Principal Place of Business:**

324 N. 15TH STREET IMMOKALEE, FL 34142

#### Cur

PO IMN

#### FEI ber: 46-1670796

## FILED Mar 01, 2023 Secretary of State 7662232880CC