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. 03/10/2023

OWNER

SIGNATURE: CAROLYN CHEBARO

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L13000001122

Entity Name: CAROLYN CHEBARO LIMITED LIABILITY COMPANY

Current Principal Place of Business:

7175 ORANGE DRIVE 314H DAVIE. FL 33314

Current Mailing Address:

7175 ORANGE DRIVE 314H DAVIE. FL 33314

FEI Number: 38-3903860

Name and Address of Current Registered Agent:

CHEBARO, CAROLYN 7175 ORANGE DRIVE 314H DAVIE, FL 33314 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: CAROLYN CHEBARO

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	OWNER
Name	CHEBARO, CAROLYN
Address	7175 ORANGE DRIVE 314H
City-State-Zip:	DAVIE FL 33314

03/10/2023

Certificate of Status Desired: No

Date

FILED Mar 10, 2023 Secretary of State 1407872125CC

Date