

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000017962

**Entity Name:** 22845 NEPTUNE ROAD LLC

**Current Principal Place of Business:**

5395 10TH FAIRWAY DRIVE  
#4  
DELRAY BEACH, FL 33484

**Current Mailing Address:**

5395 10TH FAIRWAY DRIVE  
#4  
DELRAY BEACH, FL 33484 US

**FEI Number:** 46-1948911

**Certificate of Status Desired:** No

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

WOLDER, LEETAL  
5395 10TH FAIRWAY DRIVE  
#4  
DELRAY BEACH, FL 33484 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           MANAGER  
Name           WOLDER, LEETAL  
Address       5395 10TH FAIRWAY DRIVE  
                  #4  
City-State-Zip: DELRAY BEACH FL 33484

Title           MANAGER  
Name           WOLDER, JORDAN MAISH  
Address       5395 10TH FAIRWAY DRIVE  
                  #4  
City-State-Zip: DELRAY BEACH FL 33484

Title           MANAGER  
Name           WOLDER, SABRINA  
Address       5395 10TH FAIRWAY DR  
                  4  
City-State-Zip: DELRAY BEACH FL 33484

*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:** LEETAL TALI WOLDER

**MANAGER**

**01/28/2022**

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

\_\_\_\_\_  
Date