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: ALLAN MILLER

Electronic Signature of Signing Authorized Person(s) Detail

Current Principal Place of Business: 6570 CORPORATE PARK CIR

Entity Name: WILDCAT RENOVATION, LLC

6570 CORPORATE PARK CIR FT. MYERS, FL 33966

Current Mailing Address:

DOCUMENT# L13000055779

6570 CORPORATE PARK CIR FT. MYERS, FL 33966 US

FEI Number: 46-1522600

Name and Address of Current Registered Agent:

MILLER, ALLAN 6570 CORPORATE PARK CIR FT. MYERS, FL 33966 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

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Authorized Person(s) Detail :

Title	MGRM	Title	MGR
Name	MILLER, ALLAN	Name	MILLER, ALLAN A
Address	6570 CORPORATE PARK CIR	Address	6570 CORPORATE PARK CIR
City-State-Zip:	FT. MYERS FL 33966	City-State-Zip:	FT. MYERS FL 33966

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 le

Certificate of Status Desired: No

FILED Jan 02, 2025 Secretary of State 8484815421CC

Date

01/02/2025

PRESIDENT