

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000053595

**Entity Name:** RENOVARE ART LLC**Current Principal Place of Business:**8393 OSPREY RD  
OSPREY RD.  
ENGLEWOOD, FL 34224**Current Mailing Address:**8393 OSPREY RD  
OSPREY RD.  
ENGLEWOOD, FL 34224 US**FEI Number:** 46-5284872**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CASLER, ROBERT ALAN  
8393 OSPREY RD  
OSPREY RD.  
ENGLEWOOD, FL 34224 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:** ROBERT A CASLER

01/23/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR
Name	CASLER, ROBERT A
Address	8393 OSPREY RD OSPREY RD.
City-State-Zip:	ENGLEWOOD FL 34224

Title	MANAGER
Name	CASLER, ROBERT ALAN
Address	8393 OSPREY RD OSPREY RD.
City-State-Zip:	ENGLEWOOD FL 34224

Title	MANAGER
Name	VIDOT, EVETT
Address	8393 OSPREY RD OSPREY RD.
City-State-Zip:	ENGLEWOOD FL 34224

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:** ROBERT CASLER

MANAGER

01/23/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date