3619 KIESSEI THE VILLAGE	_ ROAD S, FL 32163 US	
FEI Number:	47-1475449	Certificate of Status Des
Name and Ad	dress of Current Registered Agent:	
GOLLER, FREDE 3619 KIESSEL RO THE VILLAGES, F	DAD	
The above named e	ntity submits this statement for the purpose of changing its registe	red office or registered agent, or both, in the State of Fl
SIGNATURE:	FREDERICK TIMOTHY GOLLER	
	Electropic Signature of Pagistared Agent	

### 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000120193

Entity Name: FAMILY BOW TIES, LLC

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

3619 KIESSEL ROAD THE VILLAGES, FL 32163

#### **Current Mailing Address:**

3619 KIESSEL ROAD TH

# FE

## Na

	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MGR	Title	MGR		
Name	PARR, THOMAS G	Name	BOONE, PAIGE M		
Address	3619 KIESSEL ROAD	Address	3619 KIESSEL ROAD		
City-State-Zip:	THE VILLAGES FL 32163	City-State-Zip:	THE VILLAGES FL 32163		
Title	MGR	Title	MGR		
Name	PARR, JAMES H JR	Name	PARR, HUDSON M		
Address	3619 KIESSEL ROAD	Address	3619 KIESSEL ROAD		
City-State-Zip:	THE VILLAGES FL 32163	City-State-Zip:	THE VILLAGES FL 32163		

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: JAMES H PARR, JR

MANAGER

04/13/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Apr 13, 2022 **Secretary of State** 0631081388CC

04/13/2022

sired: No