

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000169173

**Entity Name:** PLOWHORSE LLC

**Current Principal Place of Business:**

643 WILLIAM ST  
KEY WEST, FL 33040

**Current Mailing Address:**

643 WILLIAM ST  
KEY WEST, FL 33040

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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            AMBR  
Name            HESSE, ROBERT T  
Address        643 WILLIAM ST  
City-State-Zip: KEY WEST FL 33040

Title            AMBR  
Name            HESSE, MARY C  
Address        643 WILLIAM ST  
City-State-Zip: KEY WEST FL 33040

*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 T. HESSE

AMBR

04/10/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date