Current Princip	oal Place of Business:		21033331	2000
ST PETERSBURG,	FL 33701			
Current Mailing	g Address:			
PO BOX 7598 SAINT PETERS	SBURG, FL 33734 UN			
FEI Number: 81-1872245 Certific		Certificate of Status Desire	d: No	
Name and Add	ress of Current Registered Agent:			
	BY, PLLC			
ELLISON & LAZENI 150 2ND AVE. N. SUITE 1770 SAINT PETERSBUI	RG, FL 33701 US			
150 2ND AVE. N. SUITE 1770 SAINT PETERSBUI	RG, FL 33701 US	ered office or regist	tered agent, or both, in the State of Florid	а.
150 2ND AVE. N. SUITE 1770 SAINT PETERSBUI The above named enti		ered office or regisi	0	a. 04/29/2022
150 2ND AVE. N. SUITE 1770 SAINT PETERSBUF The above named enti SIGNATURE:	ity submits this statement for the purpose of changing its regist	ered office or regist	0	
150 2ND AVE. N. SUITE 1770 SAINT PETERSBUF The above named enti SIGNATURE:	tity submits this statement for the purpose of changing its regist WILLIAM G. LAZENBY Electronic Signature of Registered Agent	ered office or regist	0	4/29/2022
150 2ND AVE. N. SUITE 1770 SAINT PETERSBUE The above named entit SIGNATURE: 1 Authorized Per	tity submits this statement for the purpose of changing its regist WILLIAM G. LAZENBY Electronic Signature of Registered Agent	ered office or regist	0	04/29/2022 Date
150 2ND AVE. N. SUITE 1770 SAINT PETERSBUE The above named entit SIGNATURE: N Authorized Per Title MC	tity submits this statement for the purpose of changing its register WILLIAM G. LAZENBY Electronic Signature of Registered Agent rson(s) Detail :		(04/29/2022 Date
150 2ND AVE. N. SUITE 1770 SAINT PETERSBUF The above named enti SIGNATURE: M Authorized Per Title MC Name MA	tity submits this statement for the purpose of changing its register WILLIAM G. LAZENBY Electronic Signature of Registered Agent rson(s) Detail : GR	Title	(AUTHORIZED REPRESENTATIVE	04/29/2022 Date

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: SHERI HAMMOND

AUTHORIZED SIGNOR

04/29/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Apr 29, 2022 Secretary of State 2109939128CC

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000048005

Entity Name: DREHSEN BLAKE, LLC