

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000070232

**Entity Name:** 6453 44TH AVE., LLC

**Current Principal Place of Business:**

6671 HANOVERIAN CIRCLE  
NOKOMIS, FL 34275

**Current Mailing Address:**

6671 HANOVERIAN CIRCLE  
NOKOMIS, FL 34275 US

**FEI Number:** 81-2705421

**Certificate of Status Desired:** No

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

WELLBAUM EMERY, LORI  
686 N. INDIANA AVE  
ENGLEWOOD, FL 34223 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	MGR	Title	AMBR
Name	CROWE, CRAIG	Name	CROWE, JAIMI F
Address	6671 HANOVERIAN CIRCLE	Address	6671 HANOVERIAN CIRCLE
City-State-Zip:	NOKOMIS FL 34275	City-State-Zip:	NOKOMIS FL 34275

*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:** CRAIG CROWE

**MANAGER**

**01/15/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date