

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000189141

**Entity Name:** CEDAR BLUFF LLC

**Current Principal Place of Business:**

C/O CPA TAX ADVISORS  
12995 S CLEVELAND AVE STE 160  
FORT MYERS, FL 33907

**Current Mailing Address:**

C/O CPA TAX ADVISORS  
12995 S CLEVELAND AVE STE 160  
FORT MYERS, FL 33907 US

**FEI Number:** 81-4130678

**Certificate of Status Desired:** No

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

CPA TAX ADVISORS, INC  
12995 S CLEVELAND AVENUE  
STE160  
FORT MYERS, FL 33907 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  
Name WALDRIP, EMORY  
Address 2485 RUE DU JARDIN  
H201  
City-State-Zip: NAPLES FL 34105

*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:** EMORY WALDRIP

MGR

03/22/2022

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

\_\_\_\_\_  
Date