2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2023
Secretary of State
4786659340CC

DOCUMENT# L17000063721

Entity Name: TLI - ENTERPRISE LLC

Current Principal Place of Business:

133 NW 84TH ST
GAINESVILLE, FL 32607

Current Mailing Address:

133 NW 84TH ST
GAINESVILLE, FL 32607 US

FEI Number: 81-1318471

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAGLEY-FLUELLEN, YOLANDA COLLINS
133 NW 84TH ST.
GAINESVILLE, FL 32607 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: YOLANDA HAGLEY-FLUELLEN 04/26/2023

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	AMBR
Name	HAGLEY-FLUELLEN, YOLANDA COLLINS
Address	133 NW 84TH ST
City-State-Zip:	GAINESVILLE FL 32607

Title	MBR
Name	HAGLEY, MARLIA F
Address	133 NW 84TH ST
City-State-Zip:	GAINESVILLE FL 32607

Title	MBR
Name	HAGLEY, KEESIA R
Address	133 NW 84TH ST
City-State-Zip:	GAINESVILLE FL 32607

Title	AUTHORIZED MEMBER
Name	FLUELLEN, CURTIS L
Address	133 NW 84TH ST
City-State-Zip:	GAINESVILLE FL 32607

Title	MBR
Name	HAGLEY, SHARIA M
Address	133 NW 84TH ST
City-State-Zip:	GAINESVILLE FL 32607

Title	AUTHORIZED MEMBER
Name	CRUM, GENNIE
Address	10475 COLLINS FIELD CIRCLE
City-State-Zip:	JACKSONVILLE FL 32222

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: YOLANDA HAGLEY-FLUELLEN AUTHORIZED MEMBER 04/26/2023

Electronic Signature of Signing Authorized Person(s) Detail — Date