

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000081409

Entity Name: MAHNED LLC

Current Principal Place of Business:

37633 SKY RIDGE CIRCLE
DADE CITY, FL 33525

Current Mailing Address:

37633 SKY RIDGE CIRCLE
DADE CITY, FL 33525 US

FEI Number: 82-1166679

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
7901 4TH STREET NORTH
SUITE 300
ST.PETERSBURG, FL 33702 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	Title	AMBR
Name	DENHAM, JUSTIN P	Name	DENHAM, MICHELLE A
Address	37633 SKY RIDGE CIRCLE	Address	37633 SKY RIDGE CIRCLE
City-State-Zip:	DADE CITY FL 33525	City-State-Zip:	DADE CITY FL 33525

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: JUSTIN P DENHAM

MANAGING MEMBER

05/01/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date