

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000135255

**Entity Name:** IHANDLE BASKETBALL LLC

**Current Principal Place of Business:**

6264 GREAT BEAR DR  
LAKELAND, FL 33805

**Current Mailing Address:**

6264 GREAT BEAR DR  
LAKELAND, FL 33805 US

**FEI Number:** 82-2048676

**Certificate of Status Desired:** No

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

FAUST, SHAWN  
6264 GREAT BEAR DR  
LAKELAND, FL 33805 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:** SHAWN FAUST

04/30/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                    |                 |                            |
|-----------------|--------------------|-----------------|----------------------------|
| Title           | MGR                | Title           | AUTHORIZED MEMBER/ MANAGER |
| Name            | FAUST, SHAWN P     | Name            | FAUST, TIFFANY             |
| Address         | 6264 GREAT BEAR DR | Address         | 6264 GREAT BEAR DR         |
| City-State-Zip: | LAKELAND FL 33805  | City-State-Zip: | LAKELAND FL 33805          |

*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:** SHAWN FAUST

MGR

04/30/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date