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: ANTHONY CHIOVARI

Electronic Signature of Signing Authorized Person(s) Detail

PRESIDENT

02/07/2024

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.

	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0	0, ,	
SIGNATURE	ANTHONY CHIOVARI			02/07/2024
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AMBR	Title	AUTHORIZED REPRESENTATI	/E
Name	CHIOVARI, ANTHONY	Name	DONATO, DOMENICK	
	2430 VANDERBILT BEACH RD STE 108 PMB 176	Address	5785 CAPE HARBOUR DRIVE SUITE 201	
		City-State-Zip:	CAPE CORAL FL 33914	
City-State-Zip:	NAPLES FL 34109-2654			

2430 VANDERBILT BEACH RD STE 108 PMB 176 NAPLES, FL 34109-2654 US

# FEI Number: 82-3354030

# Name and Address of Current Registered Agent:

**RIC BLACKWELL LAW PA** 10600 CHEVROLET WAY SUITE 212 ESTERO, FL 33928 US

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L17000223410

Entity Name: AMERISTAR CONTRACTING COMPANY, LLC

# **Current Principal Place of Business:**

5785 CAPE HARBOUR DRIVE SUITE 201 CAPE CORAL, FL 33914

### **Current Mailing Address:**

FILED Feb 07, 2024 Secretary of State 7188353620CC

Certificate of Status Desired: No

Date