## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000168871

Entity Name: METEOROPATHY, LLC

**Current Principal Place of Business:** 

123 S CALHOUN ST

TALLAHASSEE, FL 32301-1517

**Current Mailing Address:** 

PO BOX 391

TALLAHASSEE. FL 32302-0391 US

FEI Number: 83-1513413 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AUSLEY & MCMULLEN, P.A. C/O ELIZABETH D. BARRON, ESQ. 123 S CALHOUN ST TALLAHASSEE, FL 32301 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

FILED Feb 11, 2025

**Secretary of State** 

0895470154CC

Authorized Person(s) Detail:

Title MGR

Name GORMLEY KALAHER, GEORGIANA

Address 123 S CALHOUN ST

City-State-Zip: TALLAHASSEE FL 32301-1517

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.