

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000187292

**Entity Name:** PARROTT EXPRESS LLC

**Current Principal Place of Business:**

3030 N.ROCKY POINT DR. W  
SUITE 150  
TAMPA, FL 33607

**Current Mailing Address:**

3030 N.ROCKY POINT DR. W  
SUITE 150  
TAMPA, FL 33607

**FEI Number:** 83-1462169

**Certificate of Status Desired:** No

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

PARROTT, MONTE  
3030 N. ROCKY POINT DR. W  
SUITE 150  
TAMPA, FL 33607 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  
Name PARROTT, MONTE  
Address 3030 N. ROCKY POINT DR. W, SUITE  
150  
City-State-Zip: TAMPA FL 33607

*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:** MONTE PARROTT

**OWNER**

**04/30/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date