

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000001638

**Entity Name:** AMY HEAVILIN, CPA PLLC

**Current Principal Place of Business:**

1688 US HWY 90-W  
DEFUNIAK SPRINGS, FL 32435

**Current Mailing Address:**

PO BOX 736  
DEFUNIAK SPRINGS, FL 32435 US

**FEI Number:** 81-4957006

**Certificate of Status Desired:** No

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

HEAVILIN, AMY CPA  
1688 US HWY 90-W  
DEFUNIAK SPRINGS, FL 32435 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 MGR  
Name HEAVILIN, AMY  
Address 1688 US HWY 90-W  
City-State-Zip: DEFUNIAK SPRINGS FL 32435

*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:** AMY HEAVILIN

**OWNER**

**01/19/2023**

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

\_\_\_\_\_  
Date