

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000100656

**Entity Name:** ABRICO MANAGEMENT, LLC

**Current Principal Place of Business:**

4224 SW RIVERS END WAY  
PALM CITY, FL 34990

**Current Mailing Address:**

PO BOX 3574  
FT PIERCE, FL 34948 US

**FEI Number:** 46-2572732

**Certificate of Status Desired:** No

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

ABRISHAMI, BEHNAM  
4224 SW RIVERS END WAY  
PALM CITY, FL 34990 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	Title	MGR
Name	ABRISHAMI, BEHNAM K	Name	ABRISHAMI, SUSAN M
Address	4224 SW RIVERS END WAY	Address	4224 SW RIVERS END WAY
City-State-Zip:	PALM CITY FL 34990	City-State-Zip:	PALM CITY FL 34990

*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:** BEHNAM ABRISHAMI

**MGR**

**02/01/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date