

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000227180

**Entity Name:** 212 81ST LLC

**Current Principal Place of Business:**

212 81ST STREET  
UNIT B  
HOLMES BEACH, FL 34217

**Current Mailing Address:**

8126 TOLLBRIDGE CT  
WEST CHESTER, OH 45069 US

**FEI Number:** 84-3075838

**Certificate of Status Desired:** No

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

SIMMONS, NANCY  
1654 GLEN ABBY LANE  
WINTER HAVEN, FL 33881 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 T  
Name MURPHY, DAVID  
Address 8126 TOLLBRIDGE CT  
City-State-Zip: WEST CHESTER OH 45069

Title P  
Name MURPHY, KIRA  
Address 8126 TOLLBRIDGE CT  
City-State-Zip: WEST CHESTER OH 45069

Title V  
Name JOHNSTON, MARK  
Address 8126 TOLLBRIDGE CT  
City-State-Zip: WEST CHESTER OH 45069

Title S  
Name JOHNSTON, SARAH  
Address 8126 TOLLBRIDGE CT  
City-State-Zip: WEST CHESTER OH 45069

*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:** DAVID MURPHY

**PARTNERSHIP MEMBER** 03/11/2023

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

\_\_\_\_\_  
Date