2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000261267

Entity Name: HOMESTEAD TINY ENTERPRISES, LLC

Current Principal Place of Business:

1050 NE 6TH BLVD WILLISTON, FL 32696

Current Mailing Address:

1050 NE 6TH BLVD WILLISTON. FL 32696 US

FEI Number: 84-3555834 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRANDELL, MATT 5848 NW 80TH AVENUE RD OCALA, FL 34482 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 Apr 14, 2025

Secretary of State

1760250648CC

Authorized Person(s) Detail :

Title AMBR Title AMBR

Name CRANDELL, MATT Name JESSEN, GUIDO

Address 5848 NW 80TH AVENUE RD Address 502 DEEPWATER COVE WAY

City-State-Zip: OCALA FL 34482 City-State-Zip: HOLLY SPRINGS GA 30115

Title AMBR Title AMBR

NameWEST, KEVINNameCRANDELL, CHASEAddress775 SIENNA DRIVEAddress6500 HALCYON WAY
APT 510

City-State-Zip: CUMMING GA 30040

City-State-Zip: ALPHARETTA GA 30005

Title AMBR Title AMBR

Name LAURITZ JOHNN ADRIANSEN Name TANNER, ANDREW

Address 840 STONEHAVEN LANE Address 8965 BROCKHAM WAY

City-State-Zip: ALPHARETTA GA 30005 City-State-Zip: JOHNS CREEK MA 30022

Title AMBR Title AMBR

NameMCCREARY, STUART LNameSUSAN, FEARONAddress156 NOCATEE TRAILAddress51 GINGER LANECity-State-Zip:WOODSTOCK GA 30188City-State-Zip:ELLIJAY GA 30536

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: MATTHEW CRANDELL

MEMBER MANAGER

04/14/2025