

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000279873

**Entity Name:** M. VELLI LLC

**Current Principal Place of Business:**

2014 SW 7TH PLACE  
OCALA, FL 34471

**Current Mailing Address:**

2014 SW 7TH PLACE  
OCALA, FL 34471

**FEI Number:** 84-3997164

**Certificate of Status Desired:** No

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

MCHELLON, MICHAEL  
2014 SW 7TH PLACE  
OCALA, FL 34471 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           | ASSISTANT MANAGER             |
| Name            | MCHELLON, MICHAEL         | Name            | HARVEY MCHELLON, TIYA SHEONCA |
| Address         | 2014 SW 7TH PLACE         | Address         | 2014 SW 7TH PLACE             |
| City-State-Zip: | OCALA FL 34471            | City-State-Zip: | OCALA FL 34471                |
| Title           | AUTHORIZED MEMBER         | Title           | AUTHORIZED MEMBER             |
| Name            | MCHELLON , TRINITY NICOLE | Name            | MCHELLON, LACY SKY            |
| Address         | 2014 SW 7TH PLACE         | Address         | 2014 SW 7TH PLACE             |
| City-State-Zip: | OCALA FL 34471            | City-State-Zip: | OCALA FL 34471                |

*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: MICHAEL MCHELLON**

**MANAGER**

**05/01/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date