

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000024833

**Entity Name:** OPTIM PROPERTY MANAGEMENT, LLC

**Current Principal Place of Business:**

6836 RIDGE ROAD  
PORT RICHEY, FL 34668

**Current Mailing Address:**

PO BOX 842  
ODESSA, FL 33556 US

**FEI Number: 84-4488673**

**Certificate of Status Desired: No**

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

LETSOS, ATHANASIOS  
6836 RIDGE ROAD  
PORT RICHEY, FL 34668 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 LETSOS, ATHANASIOS  
Address PO BOX 842  
City-State-Zip: ODESSA FL 33556

*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: ATHANASIOS LETSOS**

**MANAGER**

**05/01/2025**

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

\_\_\_\_\_ Date